

Application Form

Business School

General Information

Academic Year: _____

Field of Study: _____

Student's Personal Data (to be completed by the student applying)

Family name		First name(s)	
Date of birth		Place of birth	
Sex		Nationality	
Current address		Permanent address (if different)	
Tel.		mobile	
E-Mail			
Period of study from...to	Duration of stay (month)	N° of expected ECTS credits	

Sending Institution

Name	
Address	
Home Erasmus Code (if relevant)	
Institutional exchange coordinator (name, telephone, fax and E-mail)	

Language Competence

Languages	I am currently studying this language		I have sufficient knowledge to follow lecture		I would have sufficient knowledge to follow lectures if I had some extra preparation	
	yes	no	yes	no	yes	no
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Previous and current study

Current course of study	
Number of higher education study years prior to departure abroad	

Date, Name and signature of the representative of the home university:

The application form should be returned together with a transcript (indicating those modules completed at your home university) to: a.willems@hochschule-trier.de