|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| I- PERSONAL INFORMATION | | | | | | | | | | |
| **National ID No (Passport Number for International Students)** | |  | | | | | | | |  |
| **Student ID No** | |  | | | | | | | |
| **Surname** | |  | | | | | | | |
| **Name (First / Middle)** | |  | | | | | | | |
| **Sex** | | Female  Male | | | | | | | |
| **Date of Birth (Day/Month/Year)** | |  | | | | | | | | |
| **Place of Birth** | |  | | | | | | | | |
| **Citizenship(s)\*** | |  | | | | | | | | |
| *\*Applicant’s grades will be decreased by 10 point if they will be applying to go to the country of citizenship.* | | | | | | | | | | |
| **Mother’s Name/Surname** | |  | | | | | | | | |
| **Father’s Name/ Surname** | |  | | | | | | | | |
| **Department / Program** | |  | | | | | | | | |
| **Cycle** | | Vocational  *(Short Cycle)* | | | | | | Bachelor  *(First Cycle)* | Master  *(Second Cycle)* | |
| **GPA (Grade Point Average)** | |  | | | | | | | | |
| **Disability\*** | | Yes  No  *If yes, please submit copy of your card at the time of application* | | | | | | | | |
| *\*Applicant’s grades will be increased by 10 points if they’ll prove that they have a disability. Additional grant is allocated for the disabled student for extra costs including a accompanying person.* | | | | | | | | | | |
| **Children of martyr or veteran\*** | | Yes  No | | | | | | | | |
| *\*Applicant’s grades will be increased by 10 points if they are a child of a marty and/or veteran under the 3713 act* | | | | | | | | | | |
| ***\*Students receiving protection under the 2828 Social Services Law*** | | | Yes  No  *If yes, please submit copy of your document at the time of application* | | | | | | | |
| *\*Applicant’s grades will be increased by 10 points if they are receiving protection under the 2828 Social Services Law* | | | | | | | | | | |
| **Prior participation/s in  Erasmus Mobility Programs\*** | | Yes | | *If Yes, please specify the type, the year and duration of the mobility :*  **Study - 20     /20      Academic Year**  **Traineeship - 20     /20      Academic Year**  **Duration : \_\_\_\_\_ days/months** | | | | | | |
| No | | | | | | | | |
| *\* Students have right to attend Erasmus Mobility Programs (Study and Internship) with/without grant once (for 12 months in total) in every cycle (Vocational-Bachelor and Master.).*  *\* The Erasmus Grades of the applicants who attend the Erasmus Mobility before will be reduced by 10 points for each of the mobilities.* | | | | | | | | | | |
| **Are you also applying to Erasmus+ Traineeship Program?\*** | | Yes | | | *If Yes, please specify the mobility type for which your Erasmus Grade will be reduced by 10 points*  **Study**  **Traineeship** | | | | | |
| No | | | | | | | | |
| *\* The Erasmus Grades of the applicants who are applying for both study and traineeship will be reduced by 10 points inaccordance with their preference.* | | | | | | | | | | |
| **Contact Details** | | | | | | | | | | |
| **Postal / Home Address** | |  | | | | | | | | |
| **Telephone (Home / Mobile)** | |  | | | | | | | | |
| **E-mail(s)** | |  | | | | | | | | |
| **Whom would you like to be contacted in the case of an emergency?** | | | | | | | | | | |
| **Surname** | |  | | | | | | | | |
| **Name (First / Middle)** | |  | | | | | | | | |
| **Relation to the Applicant** | |  | | | | | | | | |
| **Postal / Home Address** | |  | | | | | | | | |
| **Telephone (Home / Mobile)** | |  | | | | | | | | |
| **III. INFORMATION ON YOUR STUDY PERIOD ABROAD** | | | | | | | | | | |
| **How long do you plan to participate in the Erasmus Program abroad?** | | | | | | | **One Semester** (  Fall  Spring)  **Two Semesters** | | | |
| **UNIVERSITY PREFERENCES**  ***Please check the list of available courses, language of instruction and academic calendar (for one semester)*** | | | | | | | | | | |
| **1** | Country | | | | |  | | | | |
| **Name of University** | | | | |  | | | | |
| **Name of Department at HostUniversity** | | | | |  | | | | |
| **Language of Instruction** | | | | |  | | | | |
| **2** | **Country** | | | | |  | | | | |
| **Name of University** | | | | |  | | | | |
| **Name of Department at HostUniversity** | | | | |  | | | | |
| **Language of Instruction** | | | | |  | | | | |
| **3** | **Country** | | | | |  | | | | |
| **Name of University** | | | | |  | | | | |
| **Name of Department at HostUniversity** | | | | |  | | | | |
| **Language of Instruction** | | | | |  | | | | |
| **4** | **Country** | | | | |  | | | | |
| **Name of University** | | | | |  | | | | |
| **Name of Department at HostUniversity** | | | | |  | | | | |
| **Language of Instruction** | | | | |  | | | | |
| **Erasmus Departmental/ Program/Vocational School Coordinator :**  **Name Surname**: **Signature** | | | | | | | | | | |
| **IV. Additional Documents** | | | | | | | | | | |
| 1. **Official Transcript** | | | | | | | | | | |
| 1. **Language Exam Result** | | | | | | | | | | |
| **V. APPROVAL OF THE APPLICANT** | | | | | | | | | | |
| **I, hereby confirm that; All information in my application is complete and correct and I have read and understood the all the information on the Call for Applications published on Lokman Hekim University web-site available.  Name of the Applicant :**  **Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date :** | | | | | | | | | | |