**Erasmus+ Incoming Student Application Form**

This form should be used only by exchange students nominated by universities with an official departmental agreement with WSEI. The deadline for application at WSEI is June 30th for fall/winter semester and November 30th for spring/summer semester.

**How to apply to WSEI**

1. Contact your home university Erasmus + Coordinator for information and advice regarding your nomination. Applications submitted directly by students and without endorsement from the home university will not be accepted.
2. Select courses you are interested in at www.wsei.edu.pl/program-erasmus.
3. Get approval for these courses from your home university.
4. Fill in the application form, sign it and submit it to your Erasmus + Coordinator to be signed.
5. Your coordinator will then send the scanned copy your application via email and paper copy via postal service to WSEI.

|  |
| --- |
| **SENDING INSTITUTION** |
| *university name* |
| *institutional code* |
| *country* |
| *city, postal code, street* |
| *e-mail, phone* |

|  |  |
| --- | --- |
| **ERASMUS + COORDINATOR** | |
| *name* | |
| *phone* | *e-mail* |

|  |  |  |
| --- | --- | --- |
| **STUDENT PERSONAL DETAILS** | | |
| *family name* | | *insert your passport photo here* |
| *first name(s)* | |
| *nationality* | |
| *birth place* | |
| *birth date* | |
| *gender* | ❑ male ❑ female |
| *ID/passport no.* | |

|  |  |
| --- | --- |
| **CORRESPONDENCE ADDRESS** | |
| country | city |
| postal code | street/house no. |
| e-mail | phone no. |

|  |
| --- |
| **EMERGENCY CONTACT** |
| *name* |
| *phone* |
| *e-mail* |
| *contact language* |

|  |
| --- |
| **ACADEMIC INFORMATION** |
| *study cycle, target degree* |
| *field of study, concentration* |
| *completed semester of study* |
| *cumulative grade point average* |

|  |  |
| --- | --- |
| **EXCHANGE PROGRAM DETAILS** | |
| *period of exchange* | ❑ fall/winter semester 20 \_\_\_ /20 \_\_\_ (October – February) |
| ❑ spring/summer semester 20 \_\_\_/20 \_\_\_ (February – June) |
| *In case the duration of your stay differs from the terms listed above please state here* | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **LANGUAGE COMPETENCY** | | | | |
| NO. | LANGUAGE | LEVEL OF COMPETENCY | | |
| 1 |  | *native* | | |
|  | | **limited** | **moderate** | **fluent** |
| 2 | English | ❑ A1 ❑ A2 | ❑ B1 ❑ B2 | ❑ C1 ❑ C2 |
| 3 |  | ❑ A1 ❑ A2 | ❑ B1 ❑ B2 | ❑ C1 ❑ C2 |
| 4 |  | ❑ A1 ❑ A2 | ❑ B1 ❑ B2 | ❑ C1 ❑ C2 |

|  |  |  |
| --- | --- | --- |
| **PREFERRED COURSE AT THE RECEIVING INSTITUTION\*** | | |
| NO. | COURSE NAME\*\* | ECTS |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |
| 6 |  |  |
| 7 |  |  |

*\* Please note that your choice must be confirmed by the receiving institution based on the course availability during your planned stay and the required course prerequisites.*

*\*\* Refer to* www.wsei.edu.pl/program-erasmus.

*I hereby confirm that to the best of my knowledge and belief all the information I have given on this form is true, complete and accurate. I am aware that intentionally or negligently given false information constitutes an administrative offence and may lead to exclusions from the admissions procedure or - if discovered at a later date – to the cancellation of my administration or enrolment.*

|  |  |
| --- | --- |
| **INCOMING STUDENT’S SIGNATURE** | |
| *date* | *signature* |

|  |  |
| --- | --- |
| **SENDING INSTITUTION ERASMUS + COORDINATOR** | |
| *date* | *signature* |

The above information will be stored and processed by Wyższa Szkoła Ekonomii   
i Informatyki w Krakowie (WSEI) and is fully subject to data protection regulations currently in force.