**Application for Erasmus+ traineeship**

**Academic year** **20  /20**

|  |
| --- |
| **Student/Graduate** |
| Name, surname (titles): Student: ☐ Graduate: ☐  |
| **Contact details (permanent residence)** |
| Street:  |
| City:  |  ZIP Code:  |
| Country:   |
| Mobile:   |  E-mail:   |
|  |
| **Sending institution**  |
| Institution: **Slovak University of Technology in Bratislava – SK BRATISL01** |
| Faculty:  |
|  |
| **Receiving institution/organization/company** |
| Institution/organization/company:   |
| Address:Improvement of digital skills: ☐   |
| Traineeship period\* (dd.mm.rrrr): from  to   |

| **Previous mobilities** |
| --- |
| Is this your first mobility within ERASMUS/ERASMUS+ Programme?(regarding both study mobility or traineeship) ☐ Yes ☐No |
| If not, indicate all your previous mobilities (study/traineeship):  |
| Period (from - to): Study degree: Name of the institution/company/university:  Period (from - to): Study degree: Name of the institution/company/university:   |  |
| Period (from - to): Study degree: Name of the institution/company/university:   |  |
|  |  |

Date: ........................................... ...........................................

 Student/Graduate signature Faculty coordinator signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Length of the traineeship period can be adjusted according to the financial possibilites and capacity of the grant Erasmus+ STU.