

ECTS - EUROPEAN CREDIT TRANSFER SYSTEM

STUDENT APPLICATION FORM

(Photograph)

ACADEMIC YEAR 200../200..

FIELD Of STUDIES:.....

This application should be filled in **BLACK** in order to be easily copied or faxed

HOME INSTITUTION

Full Name and address:

Haute Ecole Namuroise Catholique (HENaC), 3, place du couvent, 5020 CHAMPION, Belgique

Web Site : www.henac.be

Faculty Coordinator - name, telephone, fax and e-mail:

Marie-Anne LECOMTE

Tel : + 32 82 20 85 26 – Fax : +32 81 20 85 88 - E-mail : relations.internationales@henac.be

Faculty/ Department Coordinator - name, telephone, fax and e-mail:

.....
.....

Erasmus Code: CHAMPIO 02

Subject Code:..

STUDENT'S PERSONAL DATA

(to be supplemented by the student - the candidate)

Name:.....Date	First name:.....
of birth:.....Sex.....	Permanent address (if different):
Nationality:.....Birthplace:.....
.....
Current address:
.....Tel.:.....
.....
.....Bank	Mobile:.....
account:.....	E-mail:.....
Name of the bank :	Contact in Belgium in case of need:
Address:.....	Name:.....
Holder:.....	Tel.:.....
	Mobile:.....

LIST OF INSTITUTIONS WHICH WILL RECEIVE the PRESENT REQUEST (in order of preference) :

Institution	Country:Code	Period of studies		Duration of the stay (in month)	N° of expected ECTS credits
		From	to		
1.....
2.....
3.....

Professional integration mobility:

- . Field :
- . Number of ECTS credits expected :
- . Number of hours :
- . Objectives:

The applicant needs to deliver a printed version as well as an **electronic version (on floppy or by mail) , in French and English** of the following documents :

1. Your letter of motivation with your teaching project.
2. Your curriculum vitae
3. Your last transcript of records

LINGUISTIC ABILITIES

Mother tongue:.....Teaching Language in sending institution (if different):.....			
Other languages	Reading	Writing	Conversation
	Level 1 to 5	Level 1 to 5	Level 1 to 5
.....			
.....			
..... Level 1			
= weak			

WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)

Type of work experience	Firm/organisation.....	Dates.....	Country.....
.....
.....

PREVIOUS AND CURRENT STUDIES

Diploma for which you currently studying :.....
 Number of higher education study years prior to departure abroad:.....
 Have you already studied abroad? Yes . Not
 If so, when and in which institution?..... **The transcript of records in appendix details of previous and current higher education study. Details not known at the time of application will be provided at a later stage.**

Do you wish you to ask for a mobility grant to face the additional expenses of your studies abroad? Yes
 . Not .

HOST INSTITUTION

We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate's transcript of records.

The above student is
 accepted on a provisional basis in our institution
 not accepted in our institution
 Department coordinator's signature Institutional coordinator's signature
Date
 : Date:.....