

**APPLICATION FORM FOR EXTENSION OF ERASMUS INTERNSHIP ABROAD PERIOD**

**PERSONAL INFORMATION**

|                      |   |
|----------------------|---|
| Surname / Name       | / |
| Faculty / Department | / |
| Student ID No        |   |
| E-mail               |   |
| Phone Number (Home)  |   |
| Mobile               |   |

**INTERNSHIP ABROAD PERIOD AT HOST INSTITUTION**

|                       |  |
|-----------------------|--|
| Host Institution      |  |
| Period of Admission   | <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER <input type="checkbox"/> |
| Extension Applied for | <input type="checkbox"/> FALL <input type="checkbox"/> SPRING <input type="checkbox"/> SUMMER <input type="checkbox"/> |

**ATTACHMENT**

Acceptance Letter

**REASON FOR EXTENSION (Brief explanation)**

|  |
|--|
|  |
|--|

**STUDENT SIGNATURE**

|                |                    |
|----------------|--------------------|
| Date    /    / | Signature<br>..... |
|----------------|--------------------|

**CONFIRMATION BY THE HOST INSTITUTION**

\*This raise is limited to this single case and does not create any precedent for future academic years.

|                |                    |
|----------------|--------------------|
| Title          |                    |
| Surname / Name |                    |
| Date    /    / | Signature<br>..... |

**CONFIRMATION OF THE ERASMUS DEPARTMENTAL COORDINATOR**

**CONFIRMATION OF THE HEAD OF DEPARTMENT**

|                |           |                |           |
|----------------|-----------|----------------|-----------|
| Surname / Name | Signature | Surname / Name | Signature |
| Date    /    / | .....     | Date    /    / | .....     |

**CONFIRMATION OF THE INSTITUTIONAL ERASMUS+ COORDINATOR**

|                |                    |
|----------------|--------------------|
| Surname / Name |                    |
| Date    /    / | Signature<br>..... |