



**GÜMÜŞHANE UNIVERSITY- …………. UNIVERSITY 2024-2025 ACADEMIC YEAR   
INTERNATIONAL CREDIT MOBILTY-ICM**

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| **APPLICATION FORM for Staff Mobility** | | | | | | | | |
| Name-Surname: | Gender: F 🞏 M 🞏 | | | | | Nationality: | | Photo |
| Date-place of birth: | Passport-National ID number: | | | | | Job Title: | |
| Home country: | Home university: | | | | | Department/Unit: | |
| Erasmus Code/PIC code: | E-mail: | | | | | Phone: | |
| Position: Academic 🞏   Administrative 🞏 | Mobility type: Teaching 🞏   Training 🞏 | | | | | Address: | | |
| Contact person for emergency: | | Contact telephone/e-mail for emergency: | | | | | Intended dates: Start dd/mm/yyyy   End dd/mm/yyyy | |
| **SELECTION CRITERIA** | | | | | | | | |
| Foreign Language Grade: | | Have you contributed to the application procedure of the ICM project for which you are applying?  Yes 🞏 +20 pts No 🞏 0 pt | | | | | Disability: Yes 🞏 +5 pts No 🞏 0 pt  *Attach a document which is no older than 3 months.* | |
| Have you ever participated in Erasmus+ mobility previously? If yes, how many?  Yes 🞏 -10 pts (each) No 🞏 +10 pts | | | | Last graduation degree  □ Bachelor +1 pt □ Master +3 pts □ PhD +5 pts | | | | |
| **MOTIVATION  *(Please explain the following shortly.)*** | | | | | | | | |
| Your tasks and responsibilities at your university | | | : | | | | | |
| Your expectations about participating in this mobility | | | : | | | | | |
| The departments you would like to visit | | | : | | | | | |
| Any special interest during this mobility | | | : | | | | | |
| The overall objectives of your mobility | | | : | | | | | |
| **COMMITMENT *I certify that the information given in this application is true, complete, and accurate to the best of my knowledge.*** | | | | | | | | |
| **Staff** | | | | | **Institutional coordinator at home university** | | | |
| **Name-Surname:** | | | | | **Name-Surname:** | | | |
| **Signature/Date:** | | | | | **Signature/Date/Stamp:** | | | |