

**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:** |