



PREPARATION COURSES IN ITALIAN LANGUAGE FOR ERASMUS STUDENTS

APPLICATION FORM

Student personal data

Surname	
Name	
Gender	<input type="checkbox"/> F (<i>female</i>) <input type="checkbox"/> M (<i>male</i>)
Date Of Birth (dd/mm/yyyy)	
Place of Birth	
Nationality	
E-Mail Address	E-mail:@.....
<i>Additional E-mail address (to be used in case of need)</i>	E-mail:@.....

Other personal information

CURRENT HOME ADDRESS	Street:
	City:
	Postal code:
	Country:
Phone Number <i>(Tel Number of Current Address)</i>	+...../...../.....

Student's Home University

Country	
Name of the University	
Erasmus ID Code <i>(es. I PERUGIA06)</i>	
Contact Person	
E-mail/Phone <i>(of Contact person)</i>	E-mail:@..... Tel. : +...../...../.....

Erasmus Host University/Institution in Italy

Name of the University/Institution	
Erasmus ID Code <i>(es. I PERUGIA06)</i>	
Contact Person	
Number of erasmus months	
E-mail/Phone <i>(of Contact person)</i>	E-mail:@..... Tel. : +...../...../.....

COURSE APPLICATION

(PLEASE TICK CLEARLY THE COURSE YOU ARE APPLYING FOR)

01 – 30 JUNE 2017 (4-weeks ordinary courses in italian language and culture for erasmus students)	<input type="checkbox"/>
03 – 31 JULY 2017 (4-weeks ordinary courses in italian language and culture for erasmus students)	<input type="checkbox"/>
01 – 31 AUGUST 2017 (4-weeks ordinary courses in italian language and culture for erasmus students)	<input type="checkbox"/>
04 – 22 SEPTEMBER 2017 (3-weeks erasmus intensive courses in italian language)	<input type="checkbox"/>
CURRENT LEVEL OF ITALIAN <i>*Please indicate the current level of your Italian competence according to the CEFR classification (from A1 to B2)</i>	

PLEASE COMPLETE AND RETURN THIS FORM VIA EMAIL TO: corsispeciali@unistrapg.it

**Warning: THE APPLICATION MUST BE COMPLETED IN ALL ITS FIELDS AND DULY SIGNED.
IT MUST BE SUBMITTED IN .PDF FORMAT**

Following the submission of the application students will receive a message indicating the receipt of the application and all details concerning the payment of the pre-enrolment quota (100.00 Euro).

CONTACTS:

Student Guidance Office
University for Foreigners of Perugia
Piazza Fortebraccio, 4, Perugia
Phone: +39 075 5746270
corsispeciali@unistrapg.it

I thereby authorize the University for Foreigners Perugia to use my personal data for institutional purposes.

Place and Date: _____

Signature: _____