Templates to fill in

## **Pupil application form**

1. Name and address of the applicant

|  |  |  |  |
| --- | --- | --- | --- |
| First name: |  | Street: |  |
| Last name: |  | Postal code & city: |  |
| Telephone: |  | Email address: |  |
| Mobile phone: |  | Date of birth |  |

2. Receiving school(s) — in order of preference

|  |  |  |
| --- | --- | --- |
| Ranking | Name of host school | Country |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
| 4. |  |  |

3. Preferred duration

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (min 2, max 12 months)

4. Family data

I live with:

|  |  |  |
| --- | --- | --- |
| 🞎 Mother and father | 🞎 Mother and partner | 🞎 Father and partner |
| 🞎 Mother | 🞎 Father | 🞎 Other (explain): |

Mother/Guardian

|  |  |  |  |
| --- | --- | --- | --- |
| First name: |  | Mobile phone: |  |
| Last name: |  | Daytime phone: |  |
| Occupation: |  |  |  |

Father/Guardian

|  |  |  |  |
| --- | --- | --- | --- |
| First name: |  | Mobile phone: |  |
| Last name: |  | Daytime phone: |  |
| Occupation: |  |  |  |

5. Brothers and sisters

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name | Age |  | Yes | No |
|  |  | Living at home? | 🞎 | 🞎 |
|  |  | Living at home? | 🞎 | 🞎 |
|  |  | Living at home? | 🞎 | 🞎 |

6. Languages

|  |  |
| --- | --- |
| Mother tongue: |  |

|  |  |
| --- | --- |
| Other languages: | |
| Language |  | Years studied |  | Speaking ability | 🞎 Poor | 🞎 Fair | 🞎 Good | 🞎 Excellent |
| Language |  | Years studied |  | Speaking ability | 🞎 Poor | 🞎 Fair | 🞎 Good | 🞎 Excellent |
| Language |  | Years studied |  | Speaking ability | 🞎 Poor | 🞎 Fair | 🞎 Good | 🞎 Excellent |

7. Self-Description

a. Please describe yourself: give information about your personality (e.g. calm/reserved, energetic, independent, open, socially active, academic, athletic, etc.), your favourite leisure activities and any other interests. Describe your relationship with your family and friends, e.g. how much time do you spend with your brothers/sisters and/or friends, what is your role in the family, in what situations do you seek advice from your parents?

|  |
| --- |
|  |

b. How do you like to spend your free afternoons and weekends? What are your different roles in your community, e.g.: school, sports, and community activities? What is important to you? What parts of your daily life do you like and what parts do you find frustrating or difficult?

|  |
| --- |
|  |

c. Academic information

|  |
| --- |
| Describe your preferred subjects briefly and explain why you like them |

d. Plans for your education and career in the future

|  |
| --- |
| Describe your plans for future studies and career |

e. Trips abroad

|  |
| --- |
| Briefly describe your experiences of earlier trips abroad (if any): e.g. explain how these trips have influenced you, what you learned from them and why you enjoyed them |

8. Motivation

Please explain why you want to participate in the long term study mobility and describe what you expect to gain from participating, at both personal and academic level. Describe how you could contribute to your host family, the receiving school and the country you will be visiting. If you have been involved in the Strategic Partnership activities between your school and the potential receiving school(s), how would you like to contribute to the project?

|  |
| --- |
|  |

9. Parental support

**This section is to be answered by the pupil’s parent(s)/guardian(s).**

How would you describe your child’s character?

|  |
| --- |
|  |

Please explain below why you think your child would benefit from taking part in the long term study mobility of pupils.

|  |
| --- |
|  |

10. Signatures

|  |
| --- |
| I, the undersigned, allow the sending school to use the data included in this form for the purposes of the selection of pupils for long term study mobility within the framework of the Erasmus+ programme. I agree that if my child is selected, these data will be communicated to the receiving school, and that the receiving school will transmit them to the family which will host my child. I understand that the data contained in this form may also be communicated to the sending and receiving National Agencies in charge of the Erasmus+ programme. All the people receiving these data will be required to treat them as confidential.  Agreed and accepted by  Name(s) and signature(s) of Parent(s)/Guardian(s) (Date)  Name and signature of pupil (Date) |