 

**ERASMUS+ PROGRAMME**

**Declaration of Interest for Erasmus+ Training Mobility Action**

**Call 2022**

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| **Contact Details**  Name:………………………………………………………………………. Title:……………………………………………………………….  Country of residence:………………………………………………  Mobile phone: ………………………………………………………..  Email: ………………………………………………………………………  Fields of interest:  …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….  **Planned Mobility: Call 2022**    Training Mobility ⃝ Teaching Mobility ⃝  Length of Stay (days)………………………………………………………(excluding the days of arrival and departure)  Expected Dates of Mobility:………………………………………………………………………… |
| **Previous mobility experience**  Have you participated in the Erasmus Mobility for Training before?  Yes ⃝ No ⃝  If yes, when was your last mobility? (dates)……………………………………………..  Where did the mobility take place? (University, City, Country) ………………………………………………………………… |
| Host University/Organization, Department, Contact Person and Contact Details (Please list the institutions in order of preference)   |  |  |  |  | | --- | --- | --- | --- | |  | **Host University/Organisation, Department** | **Contact person** | **Contact details** | | 1 |  |  |  | | 2 |  |  |  | | 3 |  |  |  |   Overall objectives of the mobility and activities to be carried out:  ...………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..  Expected impact and benefits of the proposed mobility to your personal development  ...………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..  Expected impact and benefits of the proposed mobility for the MIM  ...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………….. |
| **Your application must be accompanied by:**   1. **This Application form** 2. **A short CV** 3. **Detailed seminar program (applicable for STA mobility)** 4. **Acceptance of participation from receiving institute/organization**   **Signature:……………………………………………………… Date: ………………………………………..** |