##

مكتب برامج ايراسموس +

**جامعة الشهيد حمة لخضر- الوادي**

نيابة المديريـة المكلفـة بالعلاقات الخارجية والتعاون

## ERASMUS APPLICATION FORM University of El Oued

**ACADEMIC YEAR** …………

**PLEASE USE A COMPUTER TO FILL IN THIS FORM**

|  |  |
| --- | --- |
| Passport or ID Card Number (Compulsory) |  |
| Given Name:  |  |
| Family Name:  |  |
| Sex: | Male [ ] Female[ ]  |
| Date of Birth:(e.g.dd-mm-yyyy) |  |
| E-mail: |  |
| Telephone Number: (+213…) |  |
| Level of English | A1[ ] A2 [ ] B1[ ] B2 [ ] C1 [ ] C2 [ ] \* |

**Academic Information: for Student**

|  |  |
| --- | --- |
| Faculty/ Department |  |
| specialty |  |
| Degree | Bachelor [ ]  Master[ ] Doctorate[ ]  |
| Level | L2 [ ]  L3 [ ]  M1 [ ]  M2 [ ]  2nd year[ ]  3rd year[ ] other :[ ]  |

**Academic Information: for Academic staff**

|  |  |
| --- | --- |
| Grade |  |
| Faculty/ Department/  |  |
| specialty |  |

**Academic Information: for administrative staff**

|  |  |
| --- | --- |
| Diploma  |  |
| Faculty/ Service  |  |
| specialty |  |

|  |
| --- |
| Signature:**This application must be completely filled out and signed** |