THE WEST POMERANIAN BUSINESS SCHOOL

**STUDENT APPLICATION FORM**

(Photo)

**ACADEMIC YEAR: 2016-2017**

**FIELD OF STUDY: INTERNATIONAL BUSINESS STUDIES**

This application should be completed in **CAPITALS** in order to be easily copied and/or faxed (black ink recommended). ALL PARTS ARE OBLIGATORY! Please attach a photo in the right upper corner.

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| **SENDING INSTITUTION** (to be completed by the sending institution)  ERASMUS CODE, name and full address: .......................................................................................................................................................................................................................................................................................................................................... ERASMUS Coordinator - name, telephone and telefax numbers, e-mail:  .....................................................................................................................................................................  .....................................................................................................................................................................  Signature: Place, date:  *OFFICIAL STAMP OF SENDING INSTITUTION* |

**Applying for semester: □ winter (Oct 2016 – Feb 2017) □ summer (Feb 2017 – July 2017)**

**STUDENT’S PERSONAL DATA** (to be completed by applicant)

|  |  |
| --- | --- |
| First name and surname |  |
| Sex |  |
| Nationality |  |
| Date of birth |  |
| Place of birth |  |
| Address |  |
| Telephone / mobile number |  |
| Email address |  |
| Father and mother’s names |  |

**LANGUAGE COMPETENCE**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mother tongue: . …………….Language of studying at home institution (if different): .................................. | | | | | | |
| Other languages | I am currently studying this language | | I have sufficient knowledge to follow lectures | | I would have sufficient knowledge to follow lectures if I had some extra preparation | |
|  | yes | No | yes | no | yes | no |
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| Language certificates obtained:  Language level: |

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| Student’s signature: Date: |

*This application should be returned to: International Cooperation Department, West Pomeranian Business School   
to Joanna Latuszek (Erasmus+ coordinator):  
- via email:* [*jlatuszek@zpsb.pl*](mailto:jlatuszek@zpsb.pl) *- by fax: +48 91 814 94 95  
- or via regular mail to the address: West Pomeranian Business School, Zolnierska 53, 71-210 Szczecin, Poland.*