



Erasmus+

ECOLOGICAL UNIVERSITY OF BUCHAREST

APPLICATION FOR ADMISSION AS AN ERASMUS STUDENT

Academic year 20 / 20

PERSONAL DETAILS

1. Surname/Family Name (as in passport)

2. First Names (as in passport)

3. Date of Birth e.g. 07 June. 1987 4. Sex Male Female

Day Month Year

5. Nationality (as in passport)

6. Country of Permanent Residence

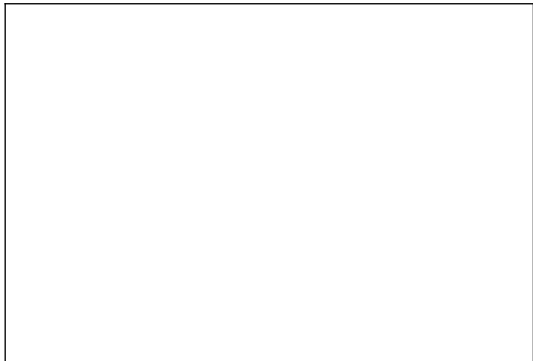
7. Home Address

Phone: Fax: E-mail:

8. Level of Study Undergraduate Graduate

9. Language Competence: Mother tongue:

Other language	I have sufficient knowledge to follow lectures		I need some extra preparation	
	YES	NO	YES	NO
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Press above to Insert Student Picture

10. Home Institution

11. Departmental Coordinator (name)

Phone:

Fax:

E-mail:

12. Institutional Erasmus Coordinator (name)

Phone:

Fax:

E-mail:

13. Estimated duration of Study at the Ecological University of Bucharest

Full academic year

First Semester only

Second Semester only

14. Briefly write the reasons why you wish to study abroad

Date

Signature of Applicant

Please return this form signed and scanned to:
erasmus@ueb.ro

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