

STUDENT APPLICATION FORM

ACADEMIC YEAR: 20.../20...

FIELD OF STUDY: _____

CURRENT YEAR OF STUDY: _____

SENDING INSTITUTION: _____

(Photograph)

STUDENT INFORMATION

First name: _____	Current address: _____
Last name: _____	_____
Sex: M / F	DNI/NIE number: _____
Nationality: _____	NIE expiration date: _____
Email address: _____	Telephone: _____

APPLY FOR THE FOLLOWING INSTITUTIONS (in order of preference)

Institution	Country	Period of Study (Fall/Spring/Annual)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

LANGUAGE COMPETENCE (must have required level in host institution)

LANGUAGE	A1	A2	B1	B2	C1	NATIVE

I have attached the following required documents for Erasmus and declare the above information to be true.

1. CV
2. Motivation Letter
3. Transcript of records (1st year)
4. Copy of Passport y DNI o NIE
5. Portfolio
6. Language certificates*

Signature: _____

Date: _____

* Students will be selected by discretionary criteria

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Additionally, by virtue of this clause, we request your expressed consent to transferring your personal data to other companies of the Istituto Europeo di Design, S.L. group and any others that may be of interest to you once a commercial relationship with you has been established. The said companies will have access to this data by request at the registered office of Istituto Europeo di Design S.L. provided contact is made with the only purpose of informing you about our promotions and services. To this effect, you are required to select one of the following options:

- I authorise the transfer of my personal data according to the above information for the purpose of receiving commercial communications.
- I do not authorize the transfer of my personal data and refuse to receive any commercial communications.

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