**ERASMUS+ KA1**

**PEDAGO [ISCE - INSTITUTO SUPERIOR DE LISBOA E VALE DO TEJO; INSTITUTO SUPERIOR DE CIÊNCIAS EDUCATIVAS DO DOURO] – P LISBOA 97**

**Letter of Intent for Student Mobility**

Academic Year 20…./20….

**PROGRAM SCHEME YOU ARE INTERESTED IN:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Study mobility at a partner institution abroad** | | | | | | | | | | | | | | |
| Erasmus+/Semester of the Erasmus+ study mobility: | | | | | | Fall (1st) | |  | | | Spring (2nd) | | |  |
|  | **Internship in a workplace abroad as a current student** | | | | | | | | | | | | | | |
| Traineeship Period: | | Fall (1st) | |  | Spring (2nd) | | | |  | | | Summer |  | |
|  | **For internships in the workplace abroad, as a recent graduate** | | | | | | | | | | | | | | |
| Starting/ending dates of mobility: | Start: | | Selecione a data | | | | End: | | | Selecione a data | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Surname: | … | | | | | | | | Name: | | | | … | | | | | | | | | | | | | | | |
| Date of Birth: | | | … | | | | | Nationality: | | | | | … | | | | | | | | | | | | | | | |
| Home address: | | | … | | | | | | | | | | | | | | | | | | | | | | | | | |
| ID number: | | … | | | | | | NIF number: | | | | | | | … | | | | | | | | | | | | | |
| Mobile No.: | | … | | | | | Email: | | | … | | | | | | | | | | | | | | | | | | |
| Program of Study: | | | | … | | | | | | | | | | | | | | | | Year of Study: | | | | | | … | | |
| Student number: | | | | … | | | | | | | | Master: | | | | |  | | Bachelor: | | | | |  | | | CTESP: |  |
| Foreign Languages: | | | | | 1st: | … | | | | | 2nd: | | | … | | | | | | | | 3rd: | | | … | | | |
| Previous participation in the Erasmus+: | | | | | | | | | | | Yes: | | | | |  | | No: | | |  | |  | | | | | |

**Study Mobility:**

I wish an Erasmus exchange period of study to the following Institution (prioritize your options):

|  |  |  |
| --- | --- | --- |
| **Institution** | | **Country** |
| 1st: | Clique ou toque aqui para introduzir texto. | Clique ou toque aqui para introduzir texto. |
| 2nd: | Clique ou toque aqui para introduzir texto. | Clique ou toque aqui para introduzir texto. |
| 3rd: | Clique ou toque aqui para introduzir texto. | Clique ou toque aqui para introduzir texto. |

**Traineeship Mobility:**

I wish an Erasmus traineeship period at the below host organization.

|  |  |
| --- | --- |
| **Host Organization** | **Country** |
| Clique ou toque aqui para introduzir texto. | Clique ou toque aqui para introduzir texto. |

**Note**:

You may be asked to submit a Language proficiency certification. Life insurance is mandatory.

Signature: ……………………………………………… Date:Clique ou toque para introduzir uma data.

(Please paste here your digital signature/digital mobile key, or print the document, sign, scan and email us).