



**STAFF APPLICATION FORM**

ERASMUS+ PROGRAMME

**General data**

|  |  |
| --- | --- |
| NAME AND SURNAME: | Click here to enter text. |
| DATE OF BIRTH: | Click here to enter a date. |
| PLACE AND STATE OF BIRTH: | Click here to enter text. |
| CITIZENSHIP: | Click here to enter text. |
| Unique Personal Identification Number (JMBG): | Click here to enter text. |
| GENDER: | Choose an item. |
| CURRENT ADDRESS: | Click here to enter text. |
| PERMANENT ADDRESS (if different): | Click here to enter text. |
| VALID PHONE NUMBER: | Click here to enter text. |
| E-MAIL: | Click here to enter text. |

**Academic information (HOME UNIVERSITY: University of Novi Sad)**

|  |  |
| --- | --- |
| FACULTY / UNIT OF UNS: | Choose an item. |
| CATEGORY OF STAFF: | Choose an item. |
| DEPARTMENT / UNIT: | Click here to enter text. |
| SCIENTIFIC / PROFESSIONAL FIELD: | Click here to enter text. |
| HAVE YOU EVER RECEIVED **ERASMUS+ SCHOLARSHIP**? | Choose an item. |
| **IF YES**, HOW MANY TIMES? | Choose an item. |
| **ALSO**, PLEASE PROVIDE THE NAME(S) OF HOST UNIVERSITIES: | Click here to enter text. |
| ARE YOU SUBMITTING PROOF FOR STAFF WITH DISABILITY, AS DESCRIBED IN THE CALL? | Choose an item. |

**Academic information (HOST UNIVERSITY)**

|  |  |  |  |
| --- | --- | --- | --- |
| HOST UNIVERSITY: | **NAME OF UNIVERSITY** | **PURPOSE OF MOBILITY** | **COUNTRY** |
| Click here to enter text. | Choose an item. | Click here to enter text. |
| PLANNED PERIOD OF MOBILITY | | Click here to enter text. | |
| PLANNED DATES OF MOBILITY | | Click here to enter text. | |
| PLANNED DURATION OF MOBILITY (**in days, with travel, in order to cover the proposed Mobility Plan**) | | Choose an item. | |
| SUBJECT CODE OF THE FIELD OF MOBILITY ([*http://www.uis.unesco.org/Education/Pages/international-standard-classification-of-education.aspx*](http://www.uis.unesco.org/Education/Pages/international-standard-classification-of-education.aspx) | | Click here to enter text. | |
| ARE YOU APPLYING FOR **2** UNIVERSITIES in this Call? | | Choose an item. | |
| **IF YES**, YOU ARE **OBLIGED** TO: | | SUBMIT **2** SEPARATE COMPLETE APPLICATIONS! | |
| **ENTER 1ST CHOICE (priority)** | **ENTER 2ND CHOICE** |
| Click here to enter text. | Click here to enter text. |
| CONTACT AT HOST UNIVERSITY WHO WILL HOST YOUR MOBILITY (name and position) | | Click here to enter text. | Click here to enter text. |
| DO YOU HAVE REQUIRED **FOREIGN LANGUAGE** COMPETENCES FOR THE TEACHING/TRAINING MOBILITY YOU ARE APPLYING FOR? | | Choose an item. | Choose an item. |

**Before submitting your application, your are obliged to read and understand UNS Regulation for Erasmus+ (criteria for evaluation):** <http://www.uns.ac.rs/index.php/univerzitet/dokumenti/send/35-pravilnici/332-pravilnik-erazmus-projekti-mobilnosti>

|  |  |
| --- | --- |
| **CHECKLIST:** | Staff Application Form |
| CV |
| Passport scan |
| Proof of employment at UNS |
| E+ Mobility Agreement proposal |
| Pre-invitation letter from the Host University; or proof of an Erasmus+ related event participation (staff week, etc) at HostUNI |
| Proof of foreign language in which mobility is conducted (with indication of the LEVEL) |
| Proof of English language (**if** different from proof of foreign language in which mobility is conducted) |
| Proof of international activities and participation in the internationalisation process (read carefully **UNS Regulations**) |
| Subject(s) provided in UNS Course Catalogue: <https://www.course-catalogue.uns.ac.rs/> (only for academic staff, if available) |
| Proof of being trained to deliver courses in English or another foreign language (only for academic staff, if available) |
| Motivation letter (only for administrative staff) |
| Any other document required by a specific HOST university indicated in the call |
| Signed Statement of Data Protection Compliance |
| Adequate proof of staff with disability, as described in the call (if applicable) |

I hereby state that my mobility period abroad within Erasmus+ shall not be financed by other sources originating from the EU funds.

I hereby confirm that the documents submitted in the application are true and correct and that the data they provide can be used by the persons authorised to check, process, keep and use them for the purposes of participation in the Erasmus+ Call and Erasmus+ mobility.

Date and place: Click here to enter text.