





ERASMUS STAFF APPLICATION FORM ACADEMIC YEAR 2023-2024

PLEASE USE A COMPUTER TO FILL IN THIS FORM

Passport or ID Card Number (Compulsory)		
Given Name:		
Family Name:		
Sex:		Male Female
Date of Birth:(e.g. dd-mm-yyyy)		
E-mail:		
Telephone Number: (+216)		
Address:		
Postcode:		
City:		
Country		
Level of English		A1 A2 B1 B2 C1 C2 *
Date de la derrière mission E+ (KA1 ou KA2)		
, , ,		
Academic Information:		
Home University:	University of Monastir	
Faculty/ Department	Faculty of Sciences of Monastir	
Degree:		
Level:	Academic Staff:	
Check list	Application form	
	Mobility agreement	teaching
	Work certificate	
	CV europass	
Scientific Diplomas		
Declaration on Hone		ior
Motivation letter		
	Work Plan	
	Letter of support	
English level certific		cate
	Other	
Host University:	Presov University, Slo	ovakia
Faculty/ Department	,	
Level:	Academic Staff :	
Candidate's Signature:		
Director/Dean's Signature:		
Stamp of the Higher Institution:		
This application must be completely filled out and signed		