DECLARATION OF COMPLIANCE

I declare that the information given in this form and on the online application form is, to the best of my knowledge, complete and correct. I understand that any mis-statement renders me liable to disqualification and will preclude a priori submission of applications for any Erasmus + mobility grant managed by this Consortium over the years to come.

|  |  |
| --- | --- |
| Forename |   |
| Surname |   |
| Nationality |   |
| Date of birth |   |
| Place of birth |   |
| Telephone number |   |
| Email address |   |
| Home address |   |
| Postcode |   |

I am enrolled in (chose one of the following options):

☐ Bachelor's Degree Programme (first cycle)

|  |  |
| --- | --- |
| Course |   |
| University  |   |
| Year of study |   |

☐ First and second level Master’s degree programme (second cycle)

|  |  |
| --- | --- |
| Course |   |
| University  |   |
| Year of study |   |

☐ PHD (third cycle)

|  |  |
| --- | --- |
| Course |   |
| University  |   |
| Year of study |   |

In the academic year 2018/2019 I am enrolled in the year of study n. \_\_\_\_\_\_\_\_\_\_\_\_\_

My personal student number is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have already used Erasmus + mobility grants for Study/Placements/Erasmus Mundus during the current study cycle (including at another University) in the academic year \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for a total of number of \_\_\_\_\_\_\_\_\_\_\_\_\_\_months out of the12 allowed (24 if single cycle).

I have at least a level B1 of English

I will do the internship:

☐ as a student. As such, I declare I have verified that I am able to complete an internship abroad, according to my study plan;

☐ as a recent graduate, newly master graduate or trainee with neo-doctorate status. As such, I declare that I will complete the traineeship within 12 months from obtaining the title and in accordance with the terms of the call. I will not enrol in any other Degree Program, Master's Degree, PhD or Master's degree at any University before completing the internship. I expect to obtain the title on the day or month/year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I declare

✓ To respect the provisions of the Call for Proposals;

✓ Not to use other scholarships or training awarded by the European Union at the same time;

✓ Not to exceed the use of 12 months with Erasmus + Mobility (24 for single cycle courses);

✓ To be aware that the evaluation of this application will be carried out in accordance with what is stated in the Call;

✓ To be aware that any unjustified or inappropriately motivated renunciation of the grant will preclude a priori submission of applications for Erasmus + mobilities managed by this Consortium over the years to come;

✓ That the data contained in this application and on the online application form correspond to truth;

✓ To be aware that the data entered will be handled for purposes relating to the institutional tasks of the organizations concerned;

✓ To be aware that participants' requirements will be audited by the consortium leader, in collaboration with each the University in the Consortium.

Place and date

Signature