APPLICATION FORM FOR EXCHANGE STUDENTS



Open-Minded

Year of Study	Duration of stay at the University of Duisburg-Essen (UDE)	
	□ Academic year (1.10.2015 - 30.9.2016)	
2015/2016		
	□ Summer term (1.4.2016 – 30.9.2016)	PHOTO
Exchange Programm		
ERASMUS Others:		

Personal Data

Surname:		First name:	
Date of birth:	City of birth:	Sex: Citizenship:	
Address:		Phone (incl. country code):	
Zip code + city, country:		Email :	

Home University

Name, place:	
Contact Details of Exchange Coordinator	
Surname:	First name:
Address:	Phone (incl. country code):
Zip code + city, country:	Email:

Person to Contact in Case of Emergency

Surname:	First name:
Address:	Phone (incl. country code):
Zip code + city, country:	Email:
Relationship of contact person with the applicant:	

B-Nr	M-Nr	AD	BEZ	KV	

Current Study

<i>l</i> ajor / minors at home university:	
lumber of completed years of study before studying abroad:	
Proposed course of study at the UDE:	
Date and place (country) of Highschool or A-level qualifications (Abitur):	

Languages

Mother tongue:	
Foreign languages Please give an accurate assessment of your language con	npetence
German:	Englisch /English:
□ very good □ good □ basic □none	🗆 very good 🛛 good 🔲 basic 🛛 none
Do you understand lectures in German?	Do you understand lectures in English?
□ Yes □ No	□ Yes □ No
Where and for how long did you study German?	Where and for how long did you study English?

Departmental Coordinator / Academic Supervisor at the UDE

Name:			
Faculty:			
Confirmation			
I hereby confirm that the information	provided is true and co	omplete.	
Place, date		Signature of student	
This is to confirm that the applicant h	nas been nominated for	r the student exchange with the UDE.	
Place, date	Stamp	Signature of home exchange coordinator	

on der Gasthochschule auszufüllen / To be filled in by the host institution				
Der oben genannte Studierende wird / the above mentioned stud	ent is			
□ vorläufig akzeptiert / provisionally accepted □ nic	ht akzeptiert / not accepted			
Datum, Unterschrift Fachkoordinator /Date, Departmental coordinator's signature	Datum, Unterschrift Universitätskoordinator / Date, Institutional coordinator's signature			

APPLICATION GUIDANCE NOTES

Please fill in the form electronically or use capital letters

1. Send the application form, all required documents and one full photocopy (complete set of application documents: application form, learning agreement and transcript) to the following address:

Campus Duisburg

Universität Duisburg-Essen International Office Geibelstr. 41 47057 Duisburg Germany

Campus Essen

Universität Duisburg-Essen International Office Universitätsstr. 15 45117 Essen Germany

- 2. Note the application deadlines:
Winter term:1 June
1 DecemberSummer term:1 December
- 3. Ensure that the application form has been signed and stamped by your exchange coordinator
- 4. Include the following documents with your application:
 - a. One passport-size-photograph (ensure that it is attached to the application form)
 - b. Transcript of records of your university to date
 - c. Learning agreement (compulsory for ERASMUS students, optional for exchange and visiting students)

Checklist

Have you...

- \Box completed the application form
- $\hfill\square$ ensured that your exchange coordinator has signed and stamped the application form
- □ included a passport size photograph
- $\hfill\square$ attached the completed learning agreement
- □ included a trancript of records
- □ included one full photocopy (application form, learning agreement, transcript of records)



Learning Agreement for studies

Academic year 20

/ 20

The Student

Last name(s)	Fist name(s)	
Date of birth	Nationality ¹	
Study cycle ²	Subject area, Code ³	
Phone	E-Mail	

The Receiving Institution

Name	Universität Duisburg-Essen	Faculty	
Erasmus code (if applicable)	D ESSEN04	Department	
Address	Universitätsstraße 15 D 45141 Essen	Country, Country code ⁴	DE
Contact person ⁵ name (university administra- tion)	Ira Terwyen	Contact person e-mail / phone	<u>ira.terwyen@uni-due.de</u> +49 (0)201 183 2032

The Sending Institution

Name	Faculty	
Erasmus code (if applicable)	Department	
Address	Country, Country code	
Contact person name (university administra- tion)	Contact person e-mail / phone	

For end notes please look at Annex A. For guidlines, please look at Annex B.



Section to be completed before the mobility

I. Proposed mobility programme

Planned period of the mobility: from [month / year]

, till [month / year]

Component ⁶ code (if any)	Component title (as indicated in the course catalogue) at the receiving institution	Semester [autumn / spring] [or term]	Number of ECTS credits to be awarded by the receiving institution upon successful completion
			Total:

Table A: Study programme abroad

Web link to the course catalogue at the receiving institution describing the learning outcomes:





Table B: Group of educational components in the student's degree that would normally be completed at the sending institution and which will be replaced by the study abroad

NB no one to one match with Table A is required. Where all credits in Table A are recognised as forming part of the programme at the sending institution without any further conditions being applied, Table B may be completed with a reference to the mobility window (see guidelines).

Component code (if any)	Component title (as indicated in the course catalogue) at the sending institution	Semester [autumn / spring] [or term]	Number of ECTS credits
			Total:

If the student does not complete successfully some educational components, the following provisions will **apply:** (Please, specify or provide a web link to the relevant information)

Language competence of the student

The level of language competence⁷ [in the main language of instruction] that the student already has or agrees to acquire by the start of the study period is:

A1	0	A2 ()	B1 ()	B2 ()	C1 ()	C2 ()

II. Responsible persons

Responsible person ⁸ in the sending institution (Academic):		
Name:	Function:	
Phone number:	E-mail:	

Responsible person ⁸ in the receiving institution (Academic):		
Name:	Function:	
Phone number:	E-mail:	



III. Commitment of the three parties

By signing this document, the student, the sending institution and the receiving institution confirm that they approve the proposed Learning Agreement and that they will comply with all the arrangements agreed by all parties. Sending and receiving institutions undertake to apply all the principles of the Erasmus Charter for Higher Education relating to mobility for studies. The receiving institution confirms that the educational components listed in Table A are in line with its course catalogue. The sending institution commits to recognise the credits gained at the receiving institution for the successfully completed educational components and to count them towards the student's degree as described in Table B. Any exceptions to this rule are documented in an annex of this Learning Agreement and agreed by all parties. The student and receiving institution will communicate to the sending institution any problems or changes regarding the proposed mobility programme, responsible persons and/or study period.

The student

Student's signature	
The sending institution	
Responsible person's signature	Date
The receiving institution	
Responsible person's signature	Date



Section to be completed during the mobility

Changes to the original Learning Agreement

I. Exceptional changes to the proposed mobility programme

Table C: Exceptional changes to study programme abroad or additional components in case of extension of stay abroad

Component code at the receiving institution (if any)	Component title (as indicated in the course catalogue) at the recei- ving institution	Deleted component [tick if applicable]	Added component [tick if applicable]	Reson for change ¹⁰	Number of ECTS credits to be awar- ded by the receiving institution upon suc- cessful completion
		\bigcirc	\bigcirc		
		0	0		
		0	0		
		\bigcirc	\bigcirc		
					Total:

The student, the sending and the receiving institutions confirm that they approve the proposed amendments to the mobility programme.

Approval by e-mail or signature of the student and of the sending and receiving institution responsible persons.

II. Changes in the responsible person(s), if any:

Responsible person ⁸ in the sending institution (Academic):		
Name:	Function:	
Phone number:	E-mail:	

Responsible person⁸ in the receiving institution (Academic):

Name:	Function:
Phone number:	E-mail:



Annex A: End notes

¹ Nationality: Country to which the person belongs administratively and that issues the ID card and/or passport.

² **Study cycle**: Short cycle (EQF level 5) / bachelor or equivalent first cycle (EQF level 6) / master or equivalent second cycle (EQF level 7) / doctorate or equivalent third cycle (EQF level 8).

³ The ISCED-F 2013 search tool available at <u>http://ec.europa.eu/education/tools/isced-f_en.htm</u> should be used to find the ISCED 2013 detailed field of education and training that is closest to the subject of the degree to be awarded to the student by the sending institution.

⁴ **Country code**: ISO 3166-2 country codes available at: <u>https://www.iso.org/obp/ui/#searc</u>h.

⁵ **Contact person**: a person who provides a link for administrative information.

⁶ An "**educational component**" is a self-contained and formal structured learning experience that features learning outcomes, credits and forms of assessment. Examples of educational components are: a course, module, seminar, laboratory work, practical work, preparation/research for a thesis, mobility window or free electives.

⁷ For the Common European Framework of Reference for Languages (**CEFR**) see <u>http://europass.cedefop.europa.</u> <u>eu/en/resources/european-language-levels-cefr</u>

⁸ **Responsible person in the sending institution**: an **academic** who has the authority to approve the mobility programme of outbound students (Learning Agreements), to exceptionally amend them when it is needed, as well as to guarantee full recognition of such programmes on behalf of the responsible academic body.

⁹ **Responsible person in the receiving institution**: an academic who has the authority to approve the mobility programme of incoming students and is committed to give them academic support in the course of their studies at the receiving institution.

¹⁰ Reasons for exceptional changes to study programme abroad:

Reasons for deleting a component	Resons for adding a component
A1) Previously selected educational component is not available at receiving institution	B1) Substituting a deleted component
A2) Component is in a different language than previously specified in the course catalogue	B2) Extending the mobility period
A3) Timetable conflict	B3) Other (please specify)
A4) Other (please specify)	