**Application for ERASMUS+ Staff Mobility grant 2022/2023**

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| --- | --- |
| **Full name** |  |
| **Date of birth** |  |
| **Nationality** |  |
| **Home address** |  |
| **Phone** |  |
| **e-mail** |  |
| **Name of the bank** |  |
| **Account number** |  |
| **BIC/SWIFT** |  |
| **Name of the home university/enterprise** |  |
| **Position** |  |
| **Host institute/department** |  |
| **Date of arrival** |  |
| **Date of departure** |  |
| **Approximate travel costs from home to the host institution**  |  |
| **Please indicate following costs:** | * **Accommodation:**
* **Travel insurance:**
* **Local transportation:**
* **Visa costs:**
 |
| **Please proovide the number of the insurance policy and the name of the insurance policy provider** | **Policy number:****Provider:** |
| **Planned period of the training/teaching activity (from: [day/month/year] till [day/month/year]), \* excluding travel days** |  |

**□ I will submit the Mobility Agreement confirmed by both parties**

**□ I will submit the tickets, invoices and proof-of-payments to them (including travel expenses, accommodation and insurance) at the first day of the mobility (\*Please note, that all the payments should be made from your personal bank account!)**

**Name: Signature:**

**Date:**