



# Erasmus+

## APPLICATION FORM

### BLENDEN INTENSIVE PROGRAMME „BIP”

**1. Personal data:**

Name nad Lastname:

Album numer:

Date of birth:

Registered address:

e-mail:

Telephone number:

**2. Faculty:**

**3. Fields of study:**

**4. Study cycle:**

**5. Period of BIP:**

- virtual part from..... to .....

- part from.... to.....

**6. The year of studies during which BIP will be carried out:**

.....

**7. Previous mobilities within Erasmus+ programme:**

Type of mobility (studies/traineeship)

Study cycle

academic year

**8. Are you a holder of the certificate of disability?**

☐ YES

☐ NO

**9. Are you entitled to a social schollarschip at WUT?**

☐ YES

☐ NO

.....  
(data and place)

.....  
(Student's signature)