



Application form Erasmus+ Student Exchange Program 2018/2019

This form is editable, please fill it in electronically

Family Name

First Name

Student ID nr

Email (UW student account)

Telephone nr

WISP year: 2 / 3 / 4

K2 (year 1)

Your study program and year

University you apply to

Semester you apply for: Autumn / Spring / Whole year

Do you have the required language certificate¹ not yet / yes

Please indicate a University of second choice (not obligatory)

Please list all your previous participations in the Erasmus+ program below

	University (or organization) / Place	Length of stay (months)
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>

Email the completed application form from your official university student email address no later than January 22nd 2018 to erasmus@psych.uw.edu.pl

By sending the form you confirm that the information you provide is accurate and complete.

¹ As proof of language proficiency, official certificates are accepted, as well as language exams by the University of Warsaw, a language passed on Matura at advanced level (counts as B2), having completed an educational degree in the language concerned or if it concerns your native language. WISP students do not need a certificate for English.