Annual Mobility Grants
Application Form

Name:

Function:

“Sending” Institution:

Host Institution:

**NB/** Incomplete applications will be considered ineligible and will not be accepted

**APPLICANT**

**I/ Personal Data**

Surname: *……………………………………………………………………………………………………………………………………*

Given Name: *……………………………………………………………………………………………………………………………..*

Male or Female (optional): *…………………………………………………………………………………………………………*

Institution of the Applicant*: …………………………………………………………………………………………………………*

Date of Birth*: …………………………………………………………………………………………………………………………….*

Address: *………………………………………………………………………………………………………………………….…………*

Post code: *…………………………………………………………………………………………………………………………………*

Country: *………………………………………………………………………………………………………………………………………*

Tel: *………………………………………………………………………………………………………………………………………………*

Mobile: *………………………………………………………………………………………………………………………………………*

Email : *…………………………………………………………………………………………………………………………………………..*

Visa (necessary or not) : *…………………………………………………………………………………………………………..…*

Any restrictions to participate in the program (medical, legal, others): *……………………………………*

**II/ Professional Data**

Professional field – specialization: *…………………………………………………………………………………………..…..*

Current position: *…………………………………………………………………………………………..………………………………*

Language skills: *…………………………………………………………………………………………..……………………………….*

Education (academic/professional institutions, professional courses, other – provide year of completion): maximum 300 words

*………………………………………………………………………………………………………………………………………………………*

*………………………………………………………………………………………………………………………………………………………*

Professional Experience: maximum 300 words
(past professional background, places of employment, any freelance practice in the arts, participation and organization of projects, other – please specify with dates)

*………………………………………………………………………………………………………………………………………………………*

*………………………………………………………………………………………………………………………………………………………*

If any, Publications - Awards – Scholarships:(provide only the most important or most recent ones, over the last 5 years)

*………………………………………………………………………………………………………………………………………………………*

Participation in international projects, events, programs, exchanges
(please specify project/program name, location, year of participation and your responsibilities/position related to it)

*………………………………………………………………………………………………………………………………………………………*

**PROFESSIONAL PROJECT**

**I/ Location and Objectives**

*(NB:* Date of departure between 01/06/19 and 31/12/19)

Name and country of the HOST institution: *…………………………………………………..…………………………*

Department: *…………………………………………………………………………………………..………………………………….*

Suggested period: *…………………………………………………………………………………………..………………………….*

Working Language: *…………………………………………………………………………………………..………………………….*

Name and position of your contact in the host institution:

Mail:

Tel:

Mobile Phone:

**WHAT: Description of the mission** planned activities, specific project, research, tangible results, etc: maximum 400 words *………………………………………………………………………………………………………………………………………………………*

*………………………………………………………………………………………………………………………………………………………*

**II/ Motivation**

**WHY: Motivation** personal/ professionals benefits, objectives, etc: maximum 400 words

*………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………*

**III/ Financial data of the applicant for bank transfer**

ACCOUNT (owner):

IBAN:

BIC:

SWIFT:

**PRINCIPLE AGREEMENT**

|  |  |
| --- | --- |
| **Applicant’s Institution** | **Host Institution** |
| *Manager ’s full name*:  | *Manager ’s full name :*  |
| Position : | Position : |
|  |  |
| Signature and stamp of the manager: | Signature and stamp of the manager: |

*Full Name of the Applicant*

Signature