

**Application for Erasmus Grant**

C

Passport

Photo

Application refers to the Academic Year \_\_\_\_\_ / \_\_\_\_\_

**Please complete this form in block letters**

**APPLICATION PROCEDURES**

CHECKLIST: Please tick boxes to ensure that requested documentation is enclosed with this completed application form.

1. Complete application form, **(this must be typed)** signed.
2. Copy of last transcript of results
3. Copy of Passport

**PLEASE NOTE**

This application must be typed in full and returned to the International Office address below.

For further information please contact: Caitriona Cummins Room 111B

International Office, GMIT, Dublin Road, Galway, Ireland

Tel: +353 91 742456 Fax: +353 91 751107 email: erasmus@gmit.ie Web: [www.gmit.ie](http://www.gmit.ie)

**This appliction form must be typed (failure to do so will void your application)**

**PERSONAL DETAILS**

Student ID

Family Name First Names

Male Female

Permanent Home Address

 Title (Mr\Mrs\Ms. etc)

 Date of Birth

 Nationality

 Personal Email Address:

Mobile Tel No.

**Programme you currently studying**

 Year:

Language you wish to study through

 Language Lecturer in GMIT

 (if applicable)

**FIRST CHOICE**

**HOST COLLEGE DETAILS**

Name of Host College

Country

SEC

SECOND CHOICE

**HOST COLLEGE DETAILS**

Name of Host College

Country

THIRD CHOICE

**HOST COLLEGE DETAILS**

Name of Host College

Country

|  |
| --- |
| **PERIOD YOU WISH TO STUDY (Please tick)** |
| **SEPT – DEC □ JAN – JUNE □ FULL ACADEMIC YEAR □** |

|  |
| --- |
| **PERIOD YOU WISH TO STUDY (Please tick)** |
| **SEPT – DEC □ JAN – JUNE □ FULL ACADEMIC YEAR □** |

The financial support scheme will be administered by the GMIT International Office and operate as follows:

* Applications must be made at least 3 month prior to the intended departure date.
* Confirmation of eligibility for the support will be issued by the International Office at least two weeks prior to the intended departure date.
* Payment of the financial support will be made by the bank transfer into the back account of the student within 1 month of confirmation of arrival at their forging destination via email to email to the Erasmus office.

Email: erasmus@gmit.ie

* Recipients of the financial support who cut short the approved duration of their stay abroad may be required to refund part of the amount paid on a case by case basis.

**DECLARATION**

I hereby undertake to confirm my arrival and participation in the study period/work placement to the GMIT International Office within one month of my start date.

Signed Date

**HEAD OF DEPARTMENT DECLARATION**

I hereby confirm that the above named student is participating in the above Erasmus Placement and that it is eligible for ECTS credits within their programme and GMIT.

Signed Date