

INCOMING APPLICATION FORM

STUDENT MOBILITY FOR

[ ]  **STUDIES** [ ]  **RESEARCH** [ ]  **TRAINEESHIP**

(Please tick the appropriate box. You may select more than one option if your mobility includes a combination.)

*Enter the Academic year you apply for.*



*Please upload your recent photo*

**I PERSONAL DATA**

|  |  |
| --- | --- |
| First Name |  |
| Family Name |  |
| Gender |       |
| Date of Birth | *Enter a date.* |
| Place of Birth |       |
| Nationality (passport) |       |
| Passport number |       |

**Please note**: enter these data **correctly**; in case of acceptance; your further documents will be prepared based on it.

**II CONTACT INFORMATION**

|  |  |
| --- | --- |
| e-mail |       |
| Phone number |       |

**Please note:** This information will not be shared except to contact the candidate regarding their application to the international mobility. Ensure you enter the correct email and regularly check the junk/spam folder in your inbox.

**III ACADEMIC INFORMATION (HOME INSTITUTION)**

|  |  |
| --- | --- |
| Home Institution |       |
| Faculty/Academy/Department |       |
| Study Programme you attend |       |
| Study Level | *Choose a level.* |
| Contact person from home institution (home coordinator) |       |
| Email from the contact person |       |

**Please note:** This information will not be shared except to contact the candidate regarding their application to the international mobility. Ensure you enter the correct email and regularly check the junk/spam folder in your inbox.

**IV LANGUAGE PROFICIENCY**

|  |  |
| --- | --- |
| English Language (based on the CEFR) – *self-evaluation*  | *Choose a level.* |
| What proof do you have of knowing English language in the stated level? |       |

**Please note:** This information doesn’t exclude you from sending the official proof for knowing the English language **if requested**! UNSA is flexible with the documents proving your knowledge of English.

**V(a) HOST INSTITUTION (FILL ONLY IF YOU COME FOR STUDIES OR COMBINATION)**

|  |  |
| --- | --- |
| University | **University of Sarajevo** |
| Study Programme you wish to attend at UNSA  |       |
| Planned Duration of Mobility | [ ]  1 semester\*[ ]  1 Academic year |
| Planned Period of Mobility\*\* | Choose a period. |
| Is your exchange part of any mobility program? | [ ] No [ ]  Yes | If YES, please select the program | Choose an item. |
| Financial support (scholarship) included?  |       |

**Please note: \*** the minimum stay for the mobility is 3 months | \*\* the dates of mobility are determined by the [academic calendar](https://international.unsa.ba/academic-calendar/)

**V(b) PRELIMINARY LIST OF COURSES AT THE UNIVERSITY OF SARAJEVO\***

|  |  |  |  |
| --- | --- | --- | --- |
| **COURSE CODE** | **UNSA DEPARTMENT** | **COURSE**  | **ECTS** |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |
|       |       |       |       |

**Please note:** \* make sure to check the Course Catalogue: <https://international.unsa.ba/modules-in-english/>. Follow instructions when choosing modules and departments! It is highly recommended to stick to the one UNSA unit that corresponds to your study field. Please note: modules are offered as “taught in English” and “English-friendly”.

**VI(a) HOST INSTITUTION (FILL ONLY IF YOU COME FOR RESEARCH/TRAINEESHIP OR COMBINATION)**

|  |  |
| --- | --- |
| University | **University of Sarajevo** |
| Department\* |       |
| Planned Duration of Research / Traineeship Mobility | [ ] 1 month  | [ ] 2 months  | [ ] 3 months  | [ ] 4 months  | [ ] 5 months  | [ ] More  |
| Planned Period of Mobility | Choose a period. | From | dd/mm/yyyy | To | dd/mm/yyyy |
| Are you flexible with the dates? | [ ] Yes [ ] No  |
| Your mobility is: | [ ] Self-financed  | If financed by program, please enter the name  |       |

**Please note: \*** enter preferred UNSA department you want to visit (you can check the member units at: <https://www.unsa.ba/en/org-jedinica>).

**VI(b) PRELIMINARY LIST OF ACTIVITIES AT THE UNIVERSITY OF SARAJEVO**

|  |
| --- |
| Describe the activities you plan to perform during your research/traineeship (please enter your expectations and needs, too). |
|       |

**VII STATEMENT**

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| [ ]  I hereby state that my mobility will not be double-funded by other funds.[ ]  I confirm that all provided information is accurate. If accepted, I will send supporting documents that verify the given data in this application form. |

**VIII SIGNATURE**

|  |
| --- |
| [ ]  I sign this application form electronically by ticking the box.  |

**Please note: \*** no actual signature is needed, just tick the box.

Date: *Enter a date.*