

# PROGRAMME ERASMUS + STUDENT APPLICATION FORM

(Photograph)

ACADEMIC YEAR: 2025-2026

FIELD OF STUDY: STATISTICS

**SENDING INSTITUTION:** ATHENS UNIVERSITY OF ECONOMICS AND BUSINESS,  
76 Patission str., 10434, ATHENS, GREECE

Erasmus Charter for Higher Education: 29089-LA-1-2014-1-GR-E4AKA1-ECHE

Erasmus ID code: G ATHINE04

**Departmental coordinator – name, telephone and telefax numbers, e-mail :**

**Contact person – name, telephone and telefax numbers, e-mail :**

Sofia Anastasiou, Tel. Nr.: + 30 210 8203113, e-mail: sofiaana@aueb.gr

## STUDENT'S PERSONAL DATA

(to be completed by the student applying)

<b>Family name :</b>	<b>First name (s) :</b>
<b>Date of birth :</b>	
<b>Sex : M <input type="checkbox"/> / F <input type="checkbox"/> Nationality :</b>	<b>Place of birth :</b>
<b>Email address:</b>	
<b>Current address :</b>	<b>Permanent address (if different) :</b>
<b>Current address is valid until :</b>	
<b>Tel. nr (incl. country code nr.):</b>	<b>Tel. nr (incl. country code nr.):</b>

## LIST OF INSTITUTIONS WHICH WILL RECEIVE THIS APPLICATION FORM (in order of preference):

Institution	Country	Period of study		Duration of stay (months)	No. of expected ECTS credits
		From	To		
1.					
2.					

3.					
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<b>Name of student:</b>
<b>Sending institution :</b> ATHENS UNIVERSITY OF ECONOMICS AND BUSINESS <b>Country :</b> GREECE <b>Briefly state the reasons why you wish to study abroad:</b> ..... ..... ..... .....

### LANGUAGE COMPETENCE

<b>Mother tongue :</b> ..... <b>Language of instruction at home institution (if different):</b> GR <input type="checkbox"/> EN <input type="checkbox"/>						
Other languages	I am currently studying this language		I have sufficient knowledge to follow lectures		I would have sufficient knowledge to follow lectures if I had some extra preparation	
	YES	NO	YES	NO	YES	NO

### WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)

Type of work experience	Firm / Organization	Dates	Country

### PREVIOUS AND CURRENT STUDY

<b>Diploma/degree for which you are currently studying :</b>	
<input checked="" type="checkbox"/> PTYCHIO (Bachelor of 4 years - 240 ECTS)	<input type="checkbox"/> MASTER (4 semesters - 120 ECTS)
<input type="checkbox"/> MASTER (3 semesters - 90 ECTS)	<input type="checkbox"/> MASTER (2 semesters - 60 ECTS)
<input type="checkbox"/> MASTER (1 academic year - 75 ECTS)	<input type="checkbox"/> DOCTORAL degree
<b>Number of higher education study years prior to departure abroad (min 1):</b> .....	
<b>Have you already been studying abroad?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>If Yes, when ? at which Institution ?</b> .....	

<b>Student's Signature</b> ..... <b>Date:</b> .....
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**RECEIVING INSTITUTION**

We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate's Transcript of records.

The above-mentioned student is

☐

provisionally accepted at our institution

☐

not accepted at our institution

Departmental coordinator's signature

Institutional coordinator's signature

.....

.....

Date : .....

Date : .....