

# PROGRAMME ERASMUS + STUDENT APPLICATION FORM

(Photograph)

ACADEMIC YEAR: 2019/ 2020  
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 ATHINEo4  
**Departmental coordinator – name, telephone and telefax numbers, e-mail :**  
 Athanasios Yannacopoulos, Tel. Nr.: +30 210 8203801, Fax Nr. : +30 210 8230 488, e-mail: [ayannaco@aueb.gr](mailto:ayannaco@aueb.gr)  
 Alexandra Livada, Tel. Nr.: +30 210 8203521, Fax Nr. : +30 210 8230 488, e-mail: [livada@aueb.gr](mailto:livada@aueb.gr)  
**Contact person – name, telephone and telefax numbers, e-mail :**  
 Sofia Anastasiou, Tel. Nr.: +30 210 8203113, e-mail: [sofiaana@aueb.gr](mailto:sofiaana@aueb.gr)

## STUDENT'S PERSONAL DATA

(to be completed by the student applying)

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

## 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.						

Name of student:

Sending institution : ATHENS UNIVERSITY OF ECONOMICS AND BUSINESS Country : GREECE

Briefly state the reasons why you wish to study abroad:

.....  
.....  
.....  
.....

**LANGUAGE COMPETENCE**

Mother tongue : ..... Language of instruction at home institution (if different): GR  EN

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**

Diploma/degree for which you are currently studying :

- PTYCHIO (Bachelor of 4 years - 240 ECTS)                       MASTER (4 semesters - 120 ECTS)  
 MASTER (3 semesters - 90 ECTS)                                       MASTER (2 semesters - 60 ECTS)  
 MASTER (1 academic year - 75 ECTS)                                       DOCTORAL degree

Number of higher education study years prior to departure abroad (min 1): .....

Have you already been studying abroad? Yes  No

If Yes, when ? at which Institution ? .....

Student's Signature..... Date:.....

**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 : .....