**UNIVERSITY OF ORADEA**

**ERASMUS PROGRAMME**

**202\_\_ – 202\_\_**

**APPLICATION FOR EXTENSION OF THE STUDY PERIOD ABROAD**

I the undersigned, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, student at the University of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, Faculty of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, ERASMUS student for the period \_\_\_ / \_\_\_ / \_\_\_\_\_ - \_\_\_ / \_\_\_ / \_\_\_\_\_, hereby request the extension of the ERASMUS study/placement period at the University of Oradea from \_\_\_ / \_\_\_ / \_\_\_\_\_ until \_\_\_ / \_\_\_ / \_\_\_\_\_.

I the undersigned declare to be aware that the integration of the scholarship depends upon the norms of the ERASMUS Programme and upon the availability of financial resources for this purpose.

This extension has already been authorized by the host institution by signing this application.

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature of the student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**UNIVERSITY ..................................................**

I hereby \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, coordinator of the ERASMUS exchange / International Relations Responsible, confirm the approval of this application for the extension of the ERASMUS study period in our institution.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Official institution stamp

 Date: \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (necessary)

**UNIVERSITY OF ORADEA**

We confirm the approval of this application for the extension of the ERASMUS study period.

Departmental Coordinator Institutional Coordinator

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Carmen Buran

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_