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| **APPLICATION FORM** | | |
| **GENERAL INFORMATION** | | |
| Name and surname | |  |
| Candidate | | ☐ PhD student, year of study: ……………  ☐ Doctoral School, year of study: ………… |
| JU Unit | | ☐ Faculty: ………………………………………………………....  Institute/Department/: ……………………………………….  ☐ Doctoral School ........................................ |
| Sex | | ☐ Female  ☐ Male |
| PESEL No  Age | | …..  ….. |
| **CANDIDATE CONTACT DETAILS** | | |
| Phone number | |  |
| E-mail address | | in the uj.edu.pl domain |
| Address of residence | |  |
| **PROJECT INFORMATION** | | |
| Application for | | ☐ Participation in conference  ☐ Participation in winter school  ☐ Participation in a short form of education (internship, course, workshop, traineeship)\*  \*please choose only one possibility |
| Receiving Institution  (including Department/Institute) | | Name of the Institution: ………………………………………………………………………………..  Faculty/Department/Institute …………………………………  Country: ………………………………………………………………….  City: ……………………………………………………………………….. |
| Information about the form of activity | | ☐ Conference name …..............................  ☐ Winter school name ...........................  ☐ Short form of education  Organizer/Hosting Institution: ………………………………………………………………. |
| Cost of participation in conference/winter school | | Please indicate only the participation fee In currency : …………………………… |
| Starting and ending date of the participation in the project | | Please indicate only the days of participation in the conference/winter school/short form of education without travel days:  FROM:  / /  (day/month/year)  TO:  / /  (day/month/year) |
| **DESCRIPTION OF THE PLANNED ACTION AND RESULTS OF THE PARTICIPATION IN THE PROJECT** | | |
| The Candidate’s motivation to participate in the Project:  (max 1500 characters including spaces) | |  |
| Proposed programme of the Candidate’s competence development within the framework of the selected form of support:  (max 1500 characters including spaces) | |  |
| Description of the planned practical use of the acquired competences:  (max 1500 characters including spaces) | |  |
| I hereby declare that I speak the language of instruction of the receiving foreign institution/English at the level which allows for free participation in the planned activities. | | |
| ..........................................................  *(Candidate's signature )* | DATE: ………………………………………………  ........................................................... *(Stamp and signature of the supervisor)* | |