



UNIVERSITATEA  
LUCIAN BLAGA  
— DIN SIBIU —

**Ministerul Educației**  
Universitatea „Lucian Blaga” din Sibiu

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**APPENDIX 30: APPLICATION FORM FOR MOBILITY FOR TRAINEESHIPS FOR STUDENTS COMING FROM COUNTRIES NOT ASSOCIATED TO THE PROGRAMME**

**Academic Year:** ... / ... - Autumn / Spring Semester

**Field of Study:** \_\_\_\_\_

**Erasmus Numerical Code:** \_\_\_\_\_

**Eligibility criteria:**

- the student is enrolled at one of LBUS partner universities within Erasmus+ framework (first, second, third cycle)
- the student keeps the status of the partner university until he finishes his period of mobility at LBUS
- English language proficiency (minimum level - B1).

**Required documents:**

- CV
- English language proficiency (minimum level B1)
- Learning Agreement for Traineeships/ Online Learning Agreement for Traineeships
  - (section Before the mobility)

This application should be completed in BLACK in order to be easily copied and / or telefaxed.

**All fields are required.** Please complete it with capital letters



### SENDING INSTITUTION

Name and full address:
Erasmus ID Code
Faculty / Department of
Departmental co-ordinator:
Phone/Fax number:
e-mail:

### STUDENT'S PERSONAL DATA

<b>Family Name:</b>	<b>First name(s):</b>
Date of Birth:        /        / ( dd/mm/yy)	
Sex:                      Nationality:	
Place of Birth:	
Current address:	Permanent address (if different):
Current address is valid until:	
E-MAIL:	
Tel.:	Tel.:

### LANGUAGE COMPETENCE

Mother tongue:	Language of instruction at home institution:					
	I am currently studying this language		I have sufficient knowledge to follow lectures		I would have sufficient knowledge if I had some extra preparation	
1.	Yes	No	Yes	No	Yes	No
other Languages:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>2.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>3.</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



### PERIOD OF STUDY

From: (dd/mm/yyyy)	To: (dd/mm/yyyy)	Duration of stay (month)	Expected ECTS credits

### PREVIOUS AND CURRENT STUDY

Diploma/ Degree for which you are currently studying:
Number of higher education study years prior to departure abroad:
Have you already been studying abroad? <input type="radio"/> Yes <input type="radio"/> No
If yes, when? At which institution?

### RECEIVING INSTITUTION

Name and full address: LUCIAN BLAGA UNIVERSITY OF SIBIU	<i>[Title, Surname &amp; Name of the E+ Inst. Coord.]</i> Country: ROMANIA Victoriei Blvd., no.10 550024, Sibiu
Faculty / Department of Departmental coordinator:	
Phone number:	<b>+40 269 21.60.62</b>
Fax number:	
email:	<i>international@ulbsibiu.ro</i>

### DO YOU NEED ACCOMODATION

**YES**

**NO**

According to the measures of Regulation (EU) 2016/679 on the protection of natural persons regarding the personal data processing and the free movement of such data, entered into force on May 25, 2018, I have taken notice and, unequivocally, I express my consent for "Lucian Blaga" University in Sibiu to process the personal data from the present form for the purpose of registering them in the digital platform of Erasmus+ mobility projects.

According to Regulation (EU) 2016/679, I declare on my own responsibility that I am aware that I benefit from the following rights: the right to access, to intervene on the data, the right not to be subject to an individual decision, the right to go to court. , the right to data portability, the right to restrict processing. In order to exercise these rights, I am aware that I can address a written request, dated and signed, to the management of the University.

**Date:**

**Signature:**