

Attention Students currently following MCAST Higher Diploma and/or Bachelor's Degree Programmes at Level 5/6 ERASMUS+ Higher Education Call

Grant Agreement No.2015-1-MT01-KA103-003678

Dear Students,

The MCAST International Office would like to inform you that a second Call for Applications under Erasmus+ Higher Education is currently open. The call for applications is open to students of the University College. Level 4 students and first year students at the University College **cannot apply**. Students already selected for an Erasmus+ mobility in the first call (May 2016) cannot apply again. Erasmus+ is offering a two month minimum work placement opportunity in Europe during the academic year **between January and May 2017**. This is a great opportunity to gain work experience in your area of studies in another European country apart from experiencing a different European culture. Students can also and subsistence. Other details such as accommodation, dates and countries cannot be communicated use this mobility to carry out research work for their dissertation. Erasmus+ will provide funding for flights at this early stage. **Preference will be given to the Institute of Applied Sciences students doing their placements between January and May 2017.**

We encourage you to apply by filling in the Erasmus+ Higher Education application form attached to this email. The MCAST International Office requires the following documentation:

- One original application
- 2 copies of your application
- 3 copies your Europass CVs
- One application/cv sent as an email attachment to christian.debono@mcast.edu.mt

Students with special needs can benefit from additional support including the possibility of an accompanying person. Kindly submit your application by not later than **Tuesday 8th November 16:30** at the International Office, floor 1, Student House, MCAST Main campus. Places are limited, but we strongly encourage you not to miss out on this unique opportunity. Make sure that your applications are **signed** by the director of your institute as indicated.

Should you need any assistance please do not hesitate to contact the MCAST International Office on 2398 7408

For more information email: christian.debono@mcast.edu.mt

APPLICATION FORM
**Two month Minimum
Placement**
ACADEMIC YEAR 2016/2017

**Attach
recent
photograph**

For Office Use Only: Application Code: _____
Date Received: _____

**Please submit 1 Original Application with a Europass CV, plus 2 hard copies of each. Also submit a digital copy of your Application/Europass CV to christian.debono@mcast.edu.mt
Students attending apprenticeships need to inform their employer of this Erasmus+ application immediately.**

PERSONAL DATA

Last Name: _____ First Name: _____
Date of Birth: _____ Gender: M F
Nationality: _____ Place of Birth: _____ I.D. Card No: _____
Home address: _____
Tel: _____ Mobile No: _____ MCAST E-mail: _____

LANGUAGE COMPETENCE

Mother Tongue: _____

Other Languages:	Speaking			Reading			Writing		
	Good	Fair	Poor	Good	Fair	Poor	Good	Fair	Poor
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OTHERS

Do you belong to any student/youth organization? If yes, kindly indicate the name of this organization and the position you hold:

Do you practice any type of sports or do you have any other hobby?

Have you been abroad before? If yes, where and for what purposes?

Do you have any access needs (physical, mental or health-related conditions)? Yes No
If yes we invite you to disclose this information so that your needs can be addressed and you can apply for an additional grant in order to cover the extra costs which may incur during your Erasmus+ mobility. In accordance with Article 21 of the Charter of Fundamental Rights of the European Union, there shall be no discrimination on the basis of this information.

For more information email: christian.debono@mcast.edu.mt

CURRENT STUDY

Institute: _____

Which course are you currently attending? _____

At What Level? _____

Course Duration: _____ years Course Years: (20____ - 20____) Current year of Study: _____

Which course/course year do you intend to progress into? _____

Why do you wish to undertake a two month placement abroad?

PREVIOUS EXPERIENCE

Have you been on any exchanges abroad? Yes No

If yes, when and where? _____

Was it under any EU funded project? If yes, specify which programme: _____

PLACEMENT PREFERENCE

Kindly indicate in what **type of companies/ employment** you would like to follow your exchange:

1st Preference: _____

2nd Preference: _____

3rd Preference: _____

Signature of Applicant: _____ Date: _____

Signature of Director: _____ Date: _____

Applications with missing signatures will not be accepted. Please submit 1 original application with a Europass CV, plus two hard copies of each. Also submit a digital copy of your Application/Europass CV to christian.debono@mcast.edu.mt.

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