Erasmus+ Student Exchange Program

Application Form

for

**Aristotle University of Thessaloniki, Greece**

**SPRING SEMESTER 2026**

**STUDENT’S PERSONAL DATA**

*(To be completed by the student applying)*

|  |  |
| --- | --- |
| Family name:  | First name(s):  |
| Sex:  | E-mail address:  |
| Date of Birth:  | Tel:  |
| Place of Birth:  | Passport N. / Personal ID number: |
| Current address: |  |

**STUDENT’S ACADEMIC DATA**

|  |  |
| --- | --- |
| Level of Studies | Bachelor: [ ]  Master: [ ]  PhD: [ ]  |
| Name of School (faculty) |  |
| Subject area (specialization) |  |
| Year of Studies  |  |
| GPA  |  |

**LANGUAGE COMPETENCE**

|  |
| --- |
| Mother tongue: Language of instruction at home institution (if different):  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Other Languages | Reading  | Speaking | Writing | Listening  |
| English  |  |  |  |  |
| German  |  |  |  |  |
| Other: |  |  |  |  |

**Please indicate relevant level: Levels: A1/2 - Basic user, B1/2 - Independent user, C1/2 - Proficient**

**PREVIOUS STUDY ABROAD**

|  |
| --- |
| Have you ever been an Erasmus + (or Erasmus Mundus Student Before? Yes or No If Yes, please indicate:* Number of Months:
* Year of Mobility:
* Host University:

Level of Study: Bachelor Master PhD  |

Date:

Students Signature: