

APPLICATION FORM – Erasmus+ exchange students

CONTACT AND PERSONAL INFORMATION – Please type or write legibly.

- **Name** (Surname/First Name) _____
- **Female** ____ **Male** ____
- **Address** (street, housenumber, Zip Code, City, Country)

- **E-Mail and current phone** _____
- **Date of Birth** (day, month, year) ____/____/____
- **Place of Birth** _____
- **EU Health Insurance No.** _____
- **Passport No. (+ copy)** _____
- **Country of citizenship** _____
- **ECTS credit degree programm** _____ **ECTS**
- **Date of higher education entrance qualification** ____/____/____

Additional we need

- **CV**
- **ID-picture**
- **Copy of your identity card**
- **Copy of your visa (if necessary)**
- **Transcript of records**
- **Language certificate attesting a level of at least B2 in English or German**

With your signature, you agree to FH Wedel using your personal data and ID-picture for administration purposes.

Date _____ **Signature** _____

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