Incoming students

Application form

Mobility Name (thick ✓ the right one )

Study

Traineeship

Study combined with traineeship

Personal information

First Name

Last Name

Gender

Nationality

Unique ID/Passport Number

Email

Phone Number

Home Address

Emergency contact

University of origin

Country of University

Field of study

Number of semesters completed at home university

Mobility details

Domain/faculty you want to apply for (thick ✓ the right one)

Veterinary Medicine

Agriculture

Horticulture

Food Science

Animal Science and Biotechnology

Mobility duration

Do you need accomodation? (thick ✓ the right one)

Yes

No

Required assistance (thick ✓ the right one)

Yes

No