

Application Form for INCOMING Exchange Students 2019– 2020 Academic Year			
I - PERSONAL INFORMATION			
Surname			
Name (First / Middle)			
Sex	Female I	Male	
Date of Birth (Day/Month/Year)	<u> </u>		
Citizenship(s)			
Mother's Name			
Father's Name			
Home University			
Department / Program at Home			
University			
Cycle	Vocational		
	Bachelor		
	Master		
	\square PhD.		
Current Semester (<i>ex</i> : 1 st , 2 nd 7 th <i>etc</i> .)			
Do you have any disability?	Yes No		
(If the answer is YES, please explain the			
assistance you need)			
Contact Details			
Postal / Home Address			
E-mail(s)			
Whom would you like to be contacted in the case of an emergency?			
Surname	a in the case of an	temergency.	
Name (First / Middle)			
Relation to the Applicant			
Telephone (Home / Mobile)	/		
	/		
II. INFORMATION ON YOUR STUDY PERIOD at IKU			
Type of Mobility	Erasmus +		
Type of Wooling	Bilateral Agre	eement	
Duration of Mobility	One Semester		
	Two Semester		
Which department will you be enrolled at IKU?			
L v			
Lean take courses thought in Turkish			
I can take courses thought in Turkish		Yes No	
Will you join the Orientation Programme*?		Yes	
Are you planning to stay at IKU's dormitories**?		Yes	
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* Fuory goad omio yoar two orientatio	n nragrams (and fo		
	<u>* Every academic year, two orientation programs (one for Fall Semester, one for Spring Semester) are organized</u> for exchange students. In general they are organized one week before the start of the semester. The detailed		
announcement about orientation programme will be provided to students separately.			
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** please find the detailed information about dormitories via http://www.iku.edu.tr/ENG/2/283595/dormitories.html

V. APPROVAL OF APPLICATON

I, hereby confirm that all information in my application is complete and accurate.
My contact information can be shared within the university (e.g: Erasmus Club, Academic Department Clubs etc)

Date:/..../....

Signature: