APPLICATION FORM

**STAFF TRAINING WEEK (STW2023)**

**SEPTEMBER 25-29, 2023**

|  |  |
| --- | --- |
| **First Name** |  |
| **Last Name** |  |
| **Contact information: email address, phone number** |  |
| **Scientific/Academic degree/****Position at HEI** |  |
| **HEI represented, department (faculty, institute)** |  |
| **HEI address, website** |  |
| **Do you plan to use Erasmus+ grant for participation in STW2023?** | **Yes No** |
| **Contact information of the Erasmus+ coordinator of the sending HEI: email address, phone number** |  |
| **English knowledge** (Applicants with basic or intermediate level of language knowledge cannot be accepted) | **B2 C1/2**  |
|  |  |  |
|  **Please, list your five recent research papers published within last 5 years (priority to indexed in SCOPUS/WoS)** | 1. Paper 1
2. Paper 2
3. Paper 3
4. Paper 4
5. Paper 5
 |

Bank requisites of the sending HEI to prepare invoice:

|  |  |
| --- | --- |
| Official name of HEI: |  |
| Registration number, VAT number |  |
| Official address of HEI: |  |
| Name of the Bank, SWIFT: |  |
| Bank account: |  |

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 Application date

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STW2023 coordinator / Erasmus+ coordinator Confirmation date

EKA University of Applied Sciences