



**ESSD**

**FORMACIÓN - DISEÑO - EMPRESA**  
CENTRO DE ENSEÑANZAS ARTÍSTICAS SUPERIORES DE DISEÑO



# EXCHANGE PROGRAM ERASMUS

## 1. APPLICATION DATA

Type of person \*

Students/ Trainees

Teacher

Type of application

Incomings

Outgoings

Exchange program \*

Erasmus (SMS)

Academic year \*

2024/2025

Duration of stay \*

1 Semester

2 Semesters



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### 2. PERSONAL DATA

**Last name\***

**First name\***

**Gender \***

Male    Female

Please fill out this mandatory field.

**Date of birth\***

Please fill out this mandatory field.

**Country of birth\***

The length should be between 1 and 100 characters.

**Place of birth\***

The length should be between 1 and 100 characters.

**Nationality\***

Please fill out this mandatory field.

**Optional: 2. Nationality**

**Email address\***

Please fill out this mandatory field.

**Same e-mail address for verification**

Please fill out this mandatory field.

**I need a visa to enter the country \***

Yes    No

Please fill out this mandatory field.



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### 3. CONTACT PERSON IN CASE OF EMERGENCY

**Last name\***

Please fill out this mandatory field.

**First name\***

Please fill out this mandatory field.

**Email address\***

Please fill out this mandatory field.

**Telephone number\***

The length be between 1 and 100 characteres.



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### 4. STUDY DETAILS

**Country of home university\***

**Home university\***

**Home institution (if not listed above)**

**Faculty at home institution**

**Study program at home institution\***

**Please fill out this mandatory field.**

**Study level at the home university\***

**Please fill out this mandatory field.**

**Number of semesters completed so far\***

**Please fill out this mandatory field.**



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## EXCHANGE PROGRAM ERASMUS

### 5. INFORMATION ON THE PLANNED STAY

Host country\*

Host institution\*

Mobility \*

Study

Placement/Internship

Exchange program\*

Erasmus

Global

Double Degree

Doctorate (Third cycle)

Degree program \*

Duration (number of months)\*

Start of the exchange\*

End of the exchange\*

Estimated arrival\*

Arrival Confirmation Responsible Person Name\*