

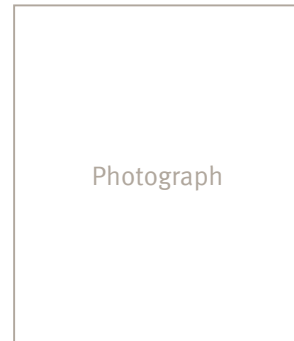


# ERASMUS Student Application Form

Akademisches Auslandsamt  
International Office

**Academic year:** 20...../20.....

- Winter term (01.10.-14.02.)
- Summer term (15.03.-31.07.)



**Field of study:** \_\_\_\_\_

**Sending institution:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Erasmus Coordinator: \_\_\_\_\_

## Personal data:

Family name: \_\_\_\_\_

First name(s): \_\_\_\_\_

Date of birth: \_\_\_\_\_

Place of birth: \_\_\_\_\_

Sex: \_\_\_\_\_ (male/female)

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Nationality: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**University entrance qualification:** \_\_\_\_\_

**Last school of secondary education:** \_\_\_\_\_

**Year of university entrance qualification:** \_\_\_\_\_

**German language proficiency:**  A1  A2  B1  B2  C1  C2

Please note that German language proficiency is crucial as most of our courses are taught in German.

Briefly state the reasons why you wish to study abroad:

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\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Erasmus coordinator

*Please send this form to*

*Ostbayerische Technische Hochschule Amberg-Weiden  
International Office  
at [international@oth-aw.de](mailto:international@oth-aw.de)*