

RECEP TAYYIP ERDOGAN UNIVERSITY **ERASMUS OFFICE**

ERASMUS KA107 APPLICATION FORM

Outgoing Staff Mobility for Training Project Period 2020

200	_
30.00	Erasmus+

1. STAFF DATA				
Name Surname :		Title:		
Date of Birth :		Nationality:		
Sex:		Turkish ID No :		
Email:		Cell Phone :		
Faculty/Institute/School:				
Department :				
2. APPLICATION DATA				
Participated Erasmus Before? :		If yes, when?:		
Present Erasmus Coordinator?:		Past Erasmus Coordinator? :		
Seniority (experience) :				
Foreign Language :		Foreign Language Score :		
2 CENDING INCOVENION DATA				
3. SENDING INSTITUTION DATA New of a set to				
Name of your University Address:	Recep Tayyip Erdogan University			
Institutional Erasmus Code :	Erasmus Office, Recep Tayyip Erdogan University, 53100, Rize TÜRKİYE TR RIZE01 TÜRKİYE			
Email:		Tel:	+90 464 223 61 26	
Eman .	erasmus@erdogan.edu.tr			
Title/Name Surname :	INSTITUTIONAL COORDINATOR	DEPARTMENTAL COORDINATOR		
	Asst. Prof. Dr. Ozan SELÇUK			
Department:	Erasmus Office			
Email:	ozan.selcuk@erdogan.edu.tr			
Tel:	+90 464 223 61 26 (Ext.4257)			
4. RECEIVING INSTITUTION DATA				
Name of receiving institution :		Country:		
Type of Enterprise (NACE):		Size of Enterprise :		
Erasmus Code :		Subject Field :		
Language of Instruction :		Planned period of teaching:		
Type of training:				
Shortly describe your training:				
5. CONFIRMATION				
I hereby confirm that above mentioned data is totally correct.				
Applicant name-surname, date and signature			Sign:	
Departmental coordinator name-surname, date and signature			Sign:	