**APPLICATION FORM FOR INTERNATIONAL MOBILITY PROGRAMS AT THE UNIVERSITY FOR FOREIGNERS OF PERUGIA – ITALY**

**TEACHING STAFF**

**Reference**

|  |  |
| --- | --- |
| Number: | Date: |
| ***Space dedicate to the erasmus and mobility office of the University for foreigners of Perugia*** |

**Candidate**

|  |  |
| --- | --- |
| First name (title, name, surname) | ***space to fill in*** |
| Citizenship | ***space to fill in*** |
| E-Mail | ***space to fill in*** |

**Home institution**

|  |  |
| --- | --- |
| Name of the Home Institution | ***space to fill in*** |
| Country | ***space to fill in*** |

**Kind of Mobility (please put a tick on the appropriate choice)**

|  |  |
| --- | --- |
| ⃣ | Erasmus+ KA131/171 **STT** mobility action – **Training purpose***In this case, the activation of mobility is subject to the completion of a Mobility Agreement between the Parties compliant with the European template* |
| ⃣ | Erasmus+ KA131/171 **STA** mobility action – **Teaching purpose***In this case, the activation of mobility is subject to the completion of a Mobility Agreement between the Parties compliant with the European template* |
| ⃣ | Other kind of international mobility*In this case:** *it is not necessary to produce a Mobility Agreement between the Parties compliant with the European template;*
* *it is necessary to indicate the existence and date of stipulation of an exchange agreement in force between the institution of origin and the University for Foreigners of Perugia:*

***please indicate here the details of the exchange agreement*** |

**Description of the role and competencies of the candidate**

|  |  |
| --- | --- |
| Summary description of the activities carried out by the candidate at the home institution | ***space to fill in***  |
| Linguistic abilities *(please list the spoken languages and their respective level)* | Language | Level (according to the CEFR) |
| ***space to fill in*** | ***level*** |
| ***space to fill in*** | ***level*** |
| ***space to fill in***  | ***level*** |

**Details of your Mobility for Teaching:**

*(please check the consistency of the proposal formulated with the University's educational offer at the following link: https://www.unistrapg.it/node/29)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Intended hosting structure at the University for Foreigners of Perugia (if already identified) | **⃣**  | Department of World Language, Literature and Arts(LILAIM) | *Three-year degree course in Digital Humanities for Italian* | ⃣ |
| *Three-year degree course in Made in Italy, Food and Hospitality* | ⃣ |
| *Master's degree course in Italian for teaching foreigners* | ⃣ |
| *Doctoral courses* | ⃣ |
| **⃣**  | Department of International Humanities and Social Sciences(SUSI) | *Three-year degree course in International Communication and Advertising* | ⃣ |
| *Three-year degree course in International Studies for Sustainability and Social Security* | ⃣ |
| *Master's degree course in Advertising communication, storytelling and image culture* | ⃣ |
| *Master's degree course in International Relations and Development Cooperation* | ⃣ |
| *Doctoral courses* | ⃣ |
| Proposed teaching activity *(please provide a summary description of the proposed activities you plan to carry out during the mobility abroad)* | ***space to fill in***  |
| Proposed training activity *(Only in case of Erasmus+ mobility, to be added only in case of combined teaching/training mobility)* | ***space to fill in******Please, provide a summary description of the proposed activities you plan to carry out during the mobility abroad*** |
| Proposed mobility period | From: ***space to fill in***  | To: ***space to fill in*** |
| Contact person at the Università per Stranieri di Perugia (if any) | ***space to fill in***  |

**Possible extra activities proposed for free by the University for Foreigners of Perugia:**

|  |  |  |
| --- | --- | --- |
| Please tick the ones of your interest | Attendance of the ordinary courses in Italian language and culture for foreigners | **⃣** |
| Visit of the Campus of the University  | **⃣** |
| Visit of the historical seat “Palazzo Gallenga” | **⃣** |

The form, duly filled, must be emailed to erasmus@unistrapg.it

Date Signature