

STUDENT APPLICATION FORM (Incomings)



Please attach a recent passport photograph

(OPTIONAL)

ACADEMIC YEAR **2018/2019**

Study Programme:

Principal study subject:

HOME INSTITUTION

Erasmus ID Code:

Tel:

Coordinator:

Fax:

Contact:

E-mail:

HOST INSTITUTION:

Hochschule für Musik FRANZ LISZT Weimar

Erasmus ID Code: D WEIMAR02

Coordinator: Dr. Jens Ewen

Contact: Signe Pribbernow

Tel: +49 3643 555184

Fax: +49 3643 555147

E-mail: signe.pribbernow@hfm-weimar.de

PERIOD of STUDY

from (dd/mm/yyyy) to (dd/mm/yyyy)

Duration (month).....

STUDENT

Family name:

First name(s):

Date of birth: Age:

Place of Birth:

Sex: Male Female

Nationality:

Current address:

Permanent address (if different):

Current address is valid until:

Tel.: +

Tel.: +

Fax: +

Fax: +

E-mail:

E-mail:

Previous/Current studies

Degree for which you are currently studying:

Professor in main field of study:

Number of higher education study years prior to departure abroad:

Please attach a transcript including full details of previous and current higher education study. Details not known at the time of application should be provided at a later stage.

TEACHER AT HOST INSTITUTION

Preferred Professor at Host Institution for main subject (if applicable)

- 1.
- 2.

LANGUAGE SKILLS

Mother tongue:

Please indicate your language skills other than mother tongue:

- 1) Language_____ Fluent Good Moderate Limited None
- 2) Language_____ Fluent Good Moderate Limited None
- 3) Language_____ Fluent Good Moderate Limited None

AUDITION

YouTube Link (your own performance):

DOCUMENTS TO ATTACH

- Learning Agreement
- Transcript of records
- Letter of motivation
- Curriculum vitae

Please send the completed form to: erasmus@hfm-weimar.de