

Application form for a place in TAI ERASMUS + International Mobility Programmes

CALL FOR ACADEMIC YEAR 2025/2026

PERSONAL DATA

NAME			
LAST NAME(S)			
DNI / NIE			
HOME			
ZIP CODE		RESIDENCE	
MOBILE PHONE			
EMAIL			

CURRENT STUDIES

<i>Bachelor's Degree</i> STUDYING AT TAI IN THE ACADEMIC YEAR 2024 /2025		COURSE (1st, 2nd, or 3rd)	
<i>Requested Destination IN ORDER OF PREFERENCE</i> INDICATE UNIVERSITY, CITY AND COUNTRY OF STAY (Erasmus+) Select one preferred option and two alternative options	Option 1:		
	Option 2:		
	Option 3:		
INDICATE THE DURATION OF <i>Preferred STAY</i>	PERIOD (1st semester, 2nd semester or full year) :		

ATTACHED (Mark with an X)

<input type="checkbox"/>	Portfolio (Your cover letter. It should include materials related to your projects and their creation processes that best reflect your work and experience).
<input type="checkbox"/>	Applicant's motivation letter (Writing a letter expressing his/her motivation and arguing his/her suitability to be eligible for the scholarship, showing the commitment and responsibility that mobility entails).
<input type="checkbox"/>	Academic Record (To be requested from the Secretary's Office, including the average grade)
<input type="checkbox"/>	Linguistic competence (Those students who have qualifications from language accreditation bodies).
<input type="checkbox"/>	European stays or programs (Those students who have previously completed some type of international educational or artistic stay or have received a scholarship in some other European program).
<input type="checkbox"/>	Copy of DNI or NIE (both sides)
<input type="checkbox"/>	Signed parental knowledge (Father /mother/guardian in case of not being emancipated. Signed declaration)



ASSESSMENT *(To be completed by the ERASMUS+ commission)*

Portfolio (25%)

Motivation letter (25%)

Academic record (20%)

Level of knowledge of the foreign language (10%)

Maturity and appropriate profile required for the position (20%)

AVERAGE RATING:

Emergency Contacts

(To be contacted exclusively in case of need during the stay if the mobility is made effective)

CONTACT 1

RELATIONSHIP WITH THE STUDENT (Father/mother, classmate , friend...)

NAME

ADDRESS

PHONE

E-MAIL

CONTACT 2

RELATIONSHIP WITH THE STUDENT (Parent, classmate, friend...)

NAME

ADDRESS

PHONE

E

E-MAIL

Fdo.: THE STUDENT

Madrid, a de de 20..