**Prometheus Program. Academic Course: \_\_\_\_\_\_/\_\_\_\_\_\_ Semester: \_\_ Number of months: \_\_**

**STUDENT PERSONAL DATA**

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| Student family name and first name: |
| NIF / Passaport: |
| Date of birth: | Place of birth: |
| Current address: |
| Telephone:Mobile Phone: | E-mail:  |

**PREVIOUS AND CURRENT STUDY**

|  |  |
| --- | --- |
| Number of higher education study years prior to departure abroad: |  |
| Have you already been studying abroad? | YES NO  |
| If YES, when?  | At which institution? |
| Diploma/degree for wich you are currently studying: |
| Course: | Cycle: | Student code: |
| Departmental coordinator: |
| Academic contact person for International exchange: |

**RECEIVING INSTITUTION DATA**

|  |  |
| --- | --- |
| UNIVERSITAT DE GIRONA**Higher Polytechnic School**International Mobility SectionAcademic SecretaryCampus Montilivi, P-117003 Girona (SPAIN)Tel: + 34 972 41 84 20 | Academic Head of International Relations of the Centre- UdG: *(ECTS Institutional Coordinator)***Dra. M. Luisa Garcia-Romeu de Luna** Tel: + 34 972 41 98 55E-mail: relinter.eps@udg.edu  |

**SENDING INSTITUTION DATA**

|  |
| --- |
| (Full name & address of sending institution) |

|  |
| --- |
| **Student family name and first name*:*****Academic year:**  |
|  |   |
| **Higher Polytechnic School** **UNIVERSITAT DE GIRONA (E-GIRONA 02)** | **Sending institution name** |
| Code | Course Title | CreditsUdG | CreditsECTS | Code | Course Title | Localcredits | ECTScredits |
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| **Student signature****Name Date**  |
| We confirm that this proposed study programme is approved  |
| Signature of the Study Coordinator at the university of origin Name Date  | Signature of the UdG Studies Coordinator Electronic *signature at the bottom of the page*Name Date | Signature of the Centre's Academic Head of External Relations-UdGElectronic signature at the bottom of the pageName: Dra. M.Luisa Garcia-Romeu de LunaVice-Director International RelationsDate  | Signature and Seal Academic Secretary of the Centre’s Academic-UdGElectronic signature at the bottom of the pageName: Maria Rosa Montalbán GarciaHead Academic Secretary OfficeDate  |

**The sending institution confirms that this proposed study programme has been:**

|  |  |  |
| --- | --- | --- |
|  | **O** Provisionally accepted**O** Accepted **O** Not Accepted | Sending Institution responsible signature and stampName: Date: |