

**Placement application form**

Erasmus+ incoming student

|  |  |
| --- | --- |
| **Student’s full name:**  |  |
| **Home University:** |  |
| **Field of study** *(please underline the right one):* | primary | pre-school |
| **Erasmus+ year and semester at ELTE:** |  |

**Where would you like to complete your placement? \***

|  |  |
| --- | --- |
| Kindergarten |  |
| Primary School |  |
| Both |  |

*\* Please put an X or a √ into the relevant box.*

**On which language would you like to complete your placement? \***

|  |  |
| --- | --- |
| English |  |
| German |  |
| Both |  |

*\* Please put an X or a √ into the relevant box.*

**Type of placement\***:

|  |  |
| --- | --- |
| **Observation** (**Min. required language level: B2)** |  |
| **Teaching** (**Min. required language level: C1)** |  |
| **The combination of both** (**Min. required language level: C1)** |  |

*\* Please put an X or a √ into the relevant box.*

**What are the requirements of your university from us to organize a placement for you [tasks to be carried out, the length of the placement (e.g., how many hours should you complete, how many times should you be there a week etc.)]?**

*Please consult with your university and give us some guidance by writing in the table below.*

|  |
| --- |
|  |

**Do you have any allergies, mental or physical illnesses we should know about (e.g., diabetes, ADHD)? \***

|  |  |
| --- | --- |
| Yes |  |
| No |  |
| If yes, please elaborate: |

*\* Please put an X or a √ into the relevant box.*

**IMPORTANT:** Please note that in case of any illnesses e.g., (infectious) diseases, mental or physical illnesses the faculty asks a written statement from the student’s physician that the student is fit to visit schools and kindergartens.

|  |  |
| --- | --- |
| ***Signature of student*** | ***Signature of sending institution*** |
| ***Date:*** | ***Date:*** |

*\*Signatures are accepted digitally, too.*