**ACADEMIC STAFF MOBILITY APPLICATION**

1. **Personal details**

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| --- |
| Name: |
| Surname:  |
| Gender: F [ ]  M [ ]   |
| Date of Birth:  | Nationality: |
| Passport Number: |
| Telephone Number:  | Email address: |

1. **Home University information**

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| Home University:  |
| Home Faculty:  |
| Name of Taught Subject(s):  |

1. **Supporting documents**

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| Your letter of motivation (why you want to come to University of Bologna) |
| Language skills: Certificate of B1 or above in English |
|  Certificate of B1 or above in Italian |
| Passport copy |

1. **Signature**

Name:

Signature:

Date: