

ERASMUS+

APPLICATION FORM

ACADEMIC YEAR: 2024 / 2025

1. Student's personal data:	
Fa	amily Name :
Fi	rst Name :
Da	ate of birth :
Ge	ender (check) :
	
Na	ationality :
Н	ome address :
e-	-mail address :
Te	elephone number (including country code number) : +
	ourse at Pantheon: /eighted Average: (0-30)
La	anguage proficiency (tick) :
⊏1	NGLISH ·
Li	□ A1□ A2□ B1□ B2□ C1
La	anguage proficiency (tick) : NGLISH : A1 A2 B1 B2



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☐ SPANISH ☐ FRENCH ☐ OTHER ()
☐ A1 ☐ A2 ☐ B1 ☐ B2 ☐ C1 ☐ C2
ease do not forget to attach to the email your language certificates. If you do not have any language certificate, you will need to et in touch with the International Relations Department (iro@istitutopantheon.it / erasmus@istitutopantheon.it)
. Program applied for (check) :
Preference list:
(Name of University & Program)
1. 2. 3
Time and length of Erasmus stay (check) :
☐ Winter Intake ☐ Spring Intake
Student's Signature