



## REGISTRATION FORM ROMANIAN CULTURE AND CIVILIZATION

*To be submitted to Mrs. Loredana HAREGA, Department of International Relations and Erasmus+  
(loremateescu@gmail.com)*

• STUDENT INFORMATION

Name and surname	
Nationality	
Email	
Home university	
Country	

• ERASMUS HOST FACULTY (IN CASE OF STUDIES)

Faculty/Department	
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• ERASMUS HOST ORGANISATION (IN CASE OF TRAINEESHIPS)

Name	
Contact person (Name/Surname)	
E-mail/Tel./Fax of Contact person	E-mail: _____ @ _____ Tel. : +___/___/_____ Fax: +___/___/_____

• ERASMUS MOBILITY

Duration (months/semesters)	
Starting date of Erasmus+ mobility (day/month/year)	_____/_____/_____
Main subject of studies	

- **LANGUAGE COMPETENCE**

<b>Level of competence</b>	<input type="checkbox"/> I (beginner) <input type="checkbox"/> I (intermediate)
<b>Why do you want to learn Romanian language?</b>	

- **RECOGNITION**

<b>Certificate of Attendance</b> (Please select one option)	<input type="checkbox"/> YES <input type="checkbox"/> NO
<b>Grade and ECTS</b> (Please select one option - different from the option selected above)	<input type="checkbox"/> YES* <input type="checkbox"/> NO
	<b>*I confirm that the course has been included in the <i>Learning Agreement/Online Learning Agreement</i> or that it will be added in the <i>Changes to the Learning Agreement – During the Mobility</i> section</b>

*I confirm that the information provided in this application is true and accurate.  
In case I have to withdraw from the course, I will inform the person in charge as soon as possible.*

*Student's confirmation (full name and signature)*

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Date: \_\_\_\_\_