**INTERNATIONAL WEEK AT THE TECHNICAL UNIVERSITY OF CLUJ-NAPOCA**

26-30 OCTOBER 2015

**APPLICATION FORM**

|  |  |
| --- | --- |
| First Name |  |
| Last Name |  |
| Gender | Male Female  |
| E-mail |  |
| Phone |  |
| Home University |  |
| Erasmus Code |  |
| Unit/ department you represent |  |
| Position |  |
| Main responsibilities |  |
| Main fields of interest |  |
| Additional comments |  |

Please send this form by e-mail to the International Relations Office international@staff.utcluj.ro before 01/07/ 2015.

|  |  |
| --- | --- |
| Signature of the applicant……………………… | Signature of the Institutional coordinator…………………………… |
| Date: | Stamp |