**ACADEMIC STAFF MOBILITY APPLICATION**

1. **Personal details**

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

1. **Home University information**

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

1. **Supporting documents**

|  |
| --- |
| 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: