



## Application Form for Erasmus Mobility Extension

Academic Year 20\_\_\_\_/20\_\_\_\_

The undersigned \_\_\_\_\_, matriculation number \_\_\_\_\_, winner of an Erasmus Scholarship for a period of \_\_\_\_\_ months starting the \_\_\_\_/\_\_\_\_/\_\_\_\_, **asks** to extend the assigned period of mobility at the University \_\_\_\_\_ as follows:

### Period of Extension

From (day/month/year)	
To (day/month/year)	
Extension in months	
Total months of Erasmus Mobility	
Reason for the extension	
Student's e-mail	

The undersigned declares to be aware that the integration of the scholarship depends upon the norms of Erasmus+ Programme and upon the availability of financial resources for this purpose. This application is part of the Erasmus+ Contract previously signed.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Student's signature \_\_\_\_\_

### ACCEPTANCE BY THE ERASMUS TUTOR OF THE RECEIVING INSTITUTION

The receiving Institution authorises the above mentioned student to extend her/his period of study for the above specified number of months.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Coordinator's signature \_\_\_\_\_

stamp

### ACCEPTANCE BY THE SENDING INSTITUTION

The sending Institution authorises the above mentioned student to extend her/his period of study for the above specified number of months.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Coordinator's signature \_\_\_\_\_

stamp

*La richiesta di prolungamento deve essere inoltrata all'Ufficio Mobilità Internazionale ([studerasmus@uniurb.it](mailto:studerasmus@uniurb.it)) almeno un mese prima della fine del periodo di studio originariamente concordato nell'Accordo Finanziario. Se lo studente chiede un prolungamento di un semestre, occorre allegare l'accordo didattico contenente i corsi che intende seguire nel periodo aggiuntivo.*