

WW Erasmus+ weltweit Antrag auf Förderung einer Personalmobilität Lehr-/Unterrichtszwecke (STA) bzw. Aus-/Weiterbildung (STT) Erasmus+ worldwide Funding Application for Staff Mobility Teaching / Training			
Bewerber*in/ Applicant			
Nachnahme(n) <i>Last name(s)</i>	<input type="text"/>	Vorname(n) <i>First name(s)</i>	<input type="text"/>
Berufserfahrung <i>Seniorityⁱ</i>	<input type="text"/>	Nationalität <i>Nationalityⁱⁱ</i>	<input type="text"/>
Geschlecht <i>Gender</i>	<input type="text"/>	Akadem. Jahr <i>Academic year</i>	<input type="text"/>
E-Mailadresse <i>E-Mailaddress</i>	<input type="text"/>		
Department at home university	<input type="text"/>		
Entsendende Einrichtung/ Sending Institution			
Bezeichnung <i>Name</i>	Technische Universität Ilmenau		
Stadt <i>City</i>	Ilmenau / Thüringen		
Erasmus Code ⁱⁱⁱ (if applicable)	D ILMENAU01	Land <i>Country/Country Code^{iv}</i>	Deutschland
Abteilung <i>Department/Unit</i>	International Office		
Anschrift <i>Address</i>	Max-Planck-Ring 14, 98693 Ilmenau		
Kontaktperson <i>Contact Person: name/department/ position</i>	Corinna Wedekind Erasmus+ ICM / Staff Mobility Coordinator	Kontaktperson <i>Contact persons e-mail / phone</i>	corinna.wedekind@tu-ilmenau.de +49 3677 / 69 1736
Empfangende Einrichtung/ Receiving Institution			
Bezeichnung <i>Name</i>	<input type="text"/>		
Stadt <i>City</i>	<input type="text"/>		
Erasmus Code (if applicable)	<input type="text"/>	Land/Country/ <i>Country Code</i>	<input type="text"/>
Abteilung <i>Department/Unit</i>	<input type="text"/>		
Anschrift <i>Address</i>	<input type="text"/>		
Kontaktperson <i>Contact Person: name/department/ position</i>	<input type="text"/>	Kontaktperson <i>Contact persons: e-mail / phone</i>	<input type="text"/>
Beginn der Mobilität (ohne Anreisetag) <i>Start date of teaching/training mobility (excl. day of arrival) (dd/mm/yy)</i>	<input type="text"/>		
Ende der Mobilität (ohne Abreisetag) <i>Start date of teaching/training mobility (excl. travel back day) (dd/mm/yy)</i>	<input type="text"/>		

Lehre an der Gasteinrichtung / Teaching at receiving institution (STA)	<input type="radio"/> Ja/ Yes	<input type="radio"/> Nein/ No
Anzahl Lehrstunden (mind. 8h/Woche) Number of teaching hours per week (min. 8)	<input type="text"/>	Kombination mit Fortbildung (STT) ^{vi} <input type="radio"/> Ja/ Yes <input type="radio"/> Nein/ No
Fach Subject field/ISCED ^v	<input type="text"/>	<input type="text"/>
Level	<input type="checkbox"/> Kurzprogramm/ Short Cycle <input type="checkbox"/> Bachelor or equivalent first cycle <input type="checkbox"/> Master or equivalent second cycle <input type="checkbox"/> Doctoral or equivalent third cycle	
Aus-/Weiterbildung an Gasteinrichtung Training at receiving institution (STT)	<input type="radio"/> Ja/ Yes	<input type="radio"/> Nein/ No
Bereich / Category of working	<input type="checkbox"/> International Office <input type="checkbox"/> Finanzen / Finance <input type="checkbox"/> Allg. oder techn. Bereich / General admin or technical admin <input type="checkbox"/> Studienberatung / student information/academic advising <input type="checkbox"/> Erweiterter Bildungsbereich / continuing education <input type="checkbox"/> Akademischer Bereich / academic staff <input type="checkbox"/> andere / others	
Weiterbildungsform Type of training	<input type="checkbox"/> workshop <input type="checkbox"/> training	<input type="checkbox"/> job shadowing <input type="checkbox"/> other
Lehrsprache Level / Language Skills		
Main instruction/Work language at receiving institution	<input type="text"/>	Sprachlevel <input type="text"/>
Fördermittelinformationen / Financial issues		
Erhalten Sie weitere finanzielle Mittel? Do you receive any other financial support at the receiving institution?	<input type="radio"/> Ja/ Yes	<input type="radio"/> Nein/ No
Falls JA, was und wieviel/ if YES, what source and amount?	<input type="text"/>	
Teilnehmer mit speziellen Bedürfnissen/ special needs	<input type="radio"/> Ja/ Yes	<input type="radio"/> Nein/ No
Bestätigung der/-s Fachkoordinator*in / Confirmation of the academic coordinator at sending institution		
Date <input type="text"/>	Signature	
Hiermit bestätige ich die Richtigkeit meiner Angaben und bewerbe mich auf den Erasmus+ ICM-Zuschuss / Hereby I confirm that all information given is correct and I am applying for the ERASMUS+ ICM grant:		
Date <input type="text"/>	Signature	

In submitting this form, you agree to the processing of your personal data according to data privacy regulations. Your data will be used for implementation of Erasmus+ exchange programs and as source for reports to EU.

ⁱ Seniority: Junior (< 10 years experience), Intermediate (approx. >10 and <20 years experience), or Senior (>20 years experience)

ⁱⁱ Country to which the person belongs administratively and what issues the ID-card and/or passport

ⁱⁱⁱ Erasmus-Code: It is a unique identifier that every higher education institution that has been awarded with the Erasmus Charter for Higher Education. It's only applicable to higher education institutions in Programme Countries.

^{iv} Country codes available at <https://www.iso.org/obp/ui/#search>

^v ISCED-Search tool is available at https://ec.europa.eu/education/international-standard-classification-of-education-isced_en

^{vi} Combination of STA and STT needs at least 4 teaching hours per week