



## Internal application for Erasmus+ staff mobility for teaching, training and further education purposes (STA and STT)

Personal details		
Name:		Date of birth:
Nationality:		Gender:
Voluntary informat	ion on impairments/s	social barriers (such as disability/chronic illness)¹:
Address: (bank details)		
Bank details:	Account holder: (if not participant)	
	Name of bank:	
	IBAN:	
	BIC:	
Tax details:	Tax ID:	
	Tax office:	
Details of your wo	rk at the University o	of Applied Sciences Potsdam
Institution, Service	25:	
Length of service a	t FHP to date: □<5 y	years□ <10 years□ >10 years□ >20 years
Status group:	□ academic	□non-academic

<sup>&</sup>lt;sup>1</sup> Please also indicate if you are a refugee or if you care for relatives. The information you provide here will remain with the International Office. It will be treated confidentially and will only be used for the purposes of international mobility. The information will not be passed on to third parties without your consent. It will be used for the selection process and for targeted advice from the International Office.





## Have you already participated in Erasmus+ mobility?

No □ Yes □
If yes:
Type of last stay: $\ \square$ Apprenticeship (STA) $\ \square$ Further education and training (STT)
Date of last stay: (month, year)
Details of planned stay
☐ Teaching (STA)
☐ Further education and training (STT)
Host institution Name and destination country:
Planned period:
Arrival:
Start and end of official duties (date and time):
Departure:
Private days:
Place date Signature