       STUDENT NO.

(Name, Surname) (from „My Studies“)

       PROGRAMME       CYCLE

(Title of the Study Programme) (Bachelor/Master)

FACULTY/ SCHOOL/ACADEMY OF

(Title of the Academic unit)

YEAR OF STUDIES IN THE PROGRAMME

Year of studies (1,2,3, etc)

To Rector of Mykolas Romeris University

REQUEST

*(Date)*

Vilnius

I am hereby requesting to send me for Erasmus+ KA131 mobility for studies to ...............................university ( country:...............................)

**and allocate Erasmus+ KA131 grant for mobility period.**

Total amount includes [delete non-applicable options] [mark applicable options]:

☐ For long-term **physical mobility** from Date: ................................ until Date: ..............................

☐ Top-up support for **students with fewer opportunities** on long-term mobilities

Reason for qualifying as fewer opportunities’ participant : ................................

☐ Top-up amount for green travel [Applicable if traveling both ways by bus, carpooling with another MRU student, train, or other sustainable means of transportation];

Specify mode of transportation : ................................

☐ Travel days [additional individual support days applicable if traveling by bus, carpooling with another MRU student, train, or other sustainable means of transportation].

Travel date [yyyy-mm-dd] from Vilnius/LT to receiving uni. [city/country]

Travel date [yyyy-mm-dd] from receiving uni. [city/country] to Vilnius/LT (traveling form other cities of other countries are not covered with top up).

☐ By signing this request, I understand that the support provided for the green travel top-up will require supporting documents provided by me, as the participant.

☐ By signing this request, I understand that the support provided as for fewer opportunities’ participant will require supporting documents provided by me, as the participant.

☐ By signing this request I understand that Erasmus+ mobility grant will be paid only for a period of my physical presence for the studies at the host organization in the host country, which will be proved by the Duration certificate issued by the host organization at the end of mobility period.

☐ By signing this request I understand that I must pay the tuition fee for the semester when implementing mobility to Mykolas Romeris University according to the terms of my study agreement, the Host University will exempt me from the registration fee and the fee for studies under the Erasmus+ mobility programme. I have read and agree to these terms and conditions for participation in the mobility under the Erasmus+ mobility programme.

Student:

*(Signature of student) (Name and Surname of student)*

Confirmed by:

Departmental

Erasmus+ coordinator

*(Signature) (Name and Surname)*

☐ Hereby I confirm that I do not have any financial debts to Mykolas Romeris University.

Student:

*(Signature of student) (Name and Surname of student)*