ERASMUS FOR STUDIES PERIOD EXTENSION

The undersigned applies for an Erasmus for studies period extension at

for _____ extra days.

Specify the new mobility end date: __________________________

Date __________________

Signature of the student _________________________________

Name and signature of the President of the Education Board at the University of Siena ________________________________

Name, signature and stamp of the receiving university’s representative ________________________________

ATTENTION

- The application must be submitted by e-mail (outgoing@unisi.it) to the International Relations Division no later than 15 days prior to the former end date.
- The total mobility period cannot be longer than 12 months and must end no later than the expiration date stated in the notice of selection (Study-Abroad Period and Acceptable Activities)
- If the prolongation affects the former study plan, the changes must be stated in the learning agreement and sent to the Students’ Office in order to obtain a new approval.

Approval of the period extension: □ Yes     □ No

The EU grant will cover the extended period: □ Yes     □ No

Date ____________

The Erasmus Officer of the University of Siena’s signature ________________________________