## **NORDPLUS STUDENT STIPEND: Application for express mobility**

Study year and semester:\_\_\_\_\_

Fill in, sign and submit the applic	ation form to the Nordplus secretariat to <u>anna@dmjx.dk</u>
<ul><li>The study trip should la</li><li>The study trip is part of</li><li>The student will not pay</li></ul>	completed at least one year of study at the home institution st no less than a week (5 working days) the study program at the home institution y any tuition fee in the country visited ove and below mentioned conditions the student can be asked to refund the full – or
Age: Gender:	Citizenship:
	Citizenship.
Number of completed years	of current study: ly now):
Receiving institution:	
Country to visit: Dates of arrival and depart.:	
Contact person at receiving i	nstit.:
Bank (full address): lban:	
I accept the Nordplus stipend an	d agree to the following terms and conditions:
<ol> <li>I will follow the schedul</li> <li>If the trip is being cance</li> <li>I will take out all manda</li> <li>By return from the stay confirming the stay and</li> </ol>	d only to cover travel expenses related to this study trip ed program during the stay arranged with the host institution elled or interrupted I will refund the stipend atory/necessary insurances I will hand in a short report (oppr. 3000 characters) to the Nordplus secretariet the benefit of it. The report may be published on malistutbildning.org/
I confirm that all information giv	en in this application is correct
Place and date	Signature of the student.
I confirm that the student's stay	is part of the study program:
Place and date:	Signature of the international coordinator.
I recommend the above student	for the stipend: Signature of the teacher.