**APPLICATION FOR EXTENSION OF ERASMUS+ MOBILITY**

**Academic Year 2020/2021**

**Student’s name: ……………………………………………………………………………………………………………………….**

Home institution: **TALLINN UNIVERSITY OF TECHNOLOGY** (Erasmus+ code: EE TALLINN 04)

Host institution: **…………………………………………………………………..**(Erasmus+ code……………………………)

Expected graduation date: **………………………………………………………………………………………………………...**

Changes of bank account details (if applicable): **…………………………………………………………**

**FINAL APPROVAL OF APPLICATION IN TALTECH**

According to the number of months still available, we approve/do not approve this application for the extension of the Erasmus+ stay abroad by ……. month(s), from …………………. until ………………………..

………………………………… ………………………………………………………………………………………

(Date) (Name, Signature, Stamp)

**STUDENT’S APPLICATION**

I hereby apply for an extension of my Erasmus+ exchange studies abroad.

Requested additional period …………………………………………………………………………………..……………………………..

 From - Until (dd/mm/yyyy)

Reason for extension: ……………………………………………………………………………………………………………………………

**………………………………….2020** ………………………………………………

(Date) (Student’s signature)

**DECLARATION ON BEHALF OF THE HOST INSTITUTION (receiving university)**

We hereby confirm that the above-mentioned student is permitted to extend his/her studies as Erasmus student at our University.

**……………………………………………………………………… ……………………………………………………………………………**

 (Name) (Date)

……………………………………………………………………………………………………………………………………………………………………………………………………

(Function) (Signature, Stamp)

**DECLARATION ON BEHALF OF HOME INSTITUTION (TalTech Programme Director)**

I hereby confirm that the above-mentioned student is permitted to extend his/her studies as an Erasmus student at the Receiving University.

……………………………………………………………………………………………………………………………………………………………………………………………………

(Name) (Date)

……………………………………………………………………………………………………………………………………………………………………………………………………

(Function) (Signature, Stamp)