**ONDOKUZ MAYIS UNIVERSITY**

**ERASMUS+ KA 1: LEARNING MOBILITY OF INDIVIDUALS**

**STUDENT MOBILITY FOR STUDIES**

**HOUSING AND FIRST CONTACT (BUDDY)**

**APPLICATION FORM**

|  |
| --- |
| **Photo****(please attach 2 photos)** |

### This form must be filled in by all students

**1. Personal data**

|  |  |
| --- | --- |
| **First name:** |  |
| **Family name:**  |  |
| **Date of birth:** |  |
| **Number of passport:** |  |
| **Tel:** |  |
| **E-mail:** |  |
| **Alternative e-mail:****(gmail preferred)** |  |
| **Address:** |  |
| **Home university:** |  |
| **City, country,** |  |
| **Area of study:** |  |

**2. Housing**

|  |  |  |
| --- | --- | --- |
| **I would like OMU to arrange accommodation for me** | **Yes** |  |
| **No, l will make my own arrangements** |  |
| **If yes, please choose one of the below:***Dormitory for boys:***Single room 1.600,00 ₺****Double room 1.300,00 ₺ per person****Room for 3 1.100,00 ₺ per person****Room for 4 1.000,00 ₺ per person***Dormitory for girls:***Single room 1.600,00 ₺****Double room 1.300,00 ₺ per person****Room for 3 1.100,00 ₺ per person****Room for 4 1.000,00 ₺ per person** | **Single room** [ ] **Double room** [ ] **Room for 3** [ ] **Room for 4** [ ] **Single room** [ ] **Double room** [ ] **Room for 3** [ ] **Room for 4** [ ]  |
| **Accommodation wanted:** | **From:** |  **To:** |
| **Physical disabilities or other requiring special facilities: (eg. Allergies)**  |  |
| **Smoker or non-smoker:** |  |

**\**You will receive information about housing when you have assigned accommodation.***

**3. First Contact-Buddy (mentor) Programme**

|  |
| --- |
| ***A First Contact is a student assigned to help you with practical matters once you have arrived in Samsun. Your First Contact can meet you at the airport and show you to your Samsun address.***  |
| **Please sign me up for a First Contact:** | **Yes:** |  |
| **No:** |  |
| **Date and time of arrival to Samsun: (If unknown please provide this information as soon as it is finalised)** |  |
| **Place of arrival to Samsun:** |  |
| **Flight / bus number:** |  |

**If you requested a mentor please answer the following questions:**

|  |  |
| --- | --- |
| **What are your hobbies, interests?** |  |
| **Describe yourself in a few sentences….** |  |
| **What do expect from a mentor programme?** |  |
| **Please provide information about the student bodies you are affiliated to?**  |  |

**4. Signature of applicant**

|  |  |
| --- | --- |
| **Date:** | **Signature:**  |

#### Please complete this form in BLOCK LETTERS and send it with other required forms to:

 **Ondokuz Mayıs University**

**International Relations Office / Erasmus Office**

**Atakum - Samsun**

**55200 TÜRKİYE**

**Fax: +90-362-4576091**

**Phone: +90-362-3121919 (Ext. 1613)**

**E-mail:** **erasmus@omu.edu.tr**

**Website:** [**http://www.omu.edu.tr**](http://www.omu.edu.tr/)

[**http://erasmus-en.omu.edu.tr/**](http://erasmus-en.omu.edu.tr/)