Participation form without grant

......... / ............................ / 202....

**TO ISTANBUL GELISIM UNIVERSITY ERASMUS OFFICE;**

According to the 2020-2021 Academic Year Erasmus+ Studying Mobility applications results, I am (Name Surnam) in the backup list number…….. . I would like to take part in the Erasmus+ Studying Mobility without grant within the framework of our Universities Bilateral Agreements. Kindly submitted for necessary action.

 Regards,

Name / Surname :

......................................................................................

Student No :

......................................................................................

Signature :

......................................................................................