



INTERCONTINENTAL STAFF MOBILITY PROGRAMME

Application form for Intercontinental mobility

Home university:

The home university belongs to:  
(CGU, CONAHEC, ANR, etc.)

Treatment:	
Name:	
Surname:	
Position:	
Department:	
Area:	
E-mail:	
Telephone:	
Indicate by order of preference <b>3 departments</b> you would like to visit:	
<u>Id offer n°</u>	<u>Host Institution</u>
1 <sup>st</sup>	
2 <sup>nd</sup>	
3 <sup>rd</sup>	
What are your expectations from the exchange and how will your home institution/service would benefit from your experience (250 characters maximum):	
Brief C.V.-studies or expertise relevant to the action (250 characters maximum):	
Signature:	
Date:	