



Università
Ca' Foscari
Venezia

– International Office, Ca' Foscari, Dorsoduro 3246, 30123 Venice, Italy –

SEMP Outgoing Student
APPLICATION FOR EXTENSION OF THE MOBILITY PERIOD

Please fill in the form, get it signed by the hosting University and then send it to the International Office of Ca' Foscari University of Venice by fax (+39 041 234 7567) or by e-mail (international.mobility@unive.it) to obtain the relevant signature. The student has also to submit the original form by hand or by mail to the International Office of Ca' Foscari University within 15 days from the end of the mobility period.

The undersigned _____

enrolled in the: Degree Programme in _____

Research Doctorate in _____

at Ca' Foscari University of Venice,

holder of a Swiss-European mobility scholarship for the _____ academic year for the duration of _____ months,

Departmental Coordinator at Ca' Foscari _____

hosting University _____

applies

to get a _____ (no. of months) **month extension of his/her Swiss-European mobility period** starting from (dd/mm/yyyy) _____ in order to conclude the courses he/she is attending at the hosting University.

Date (dd/mmh/yyyy) ____ / ____ / _____

Student's signature

<p>Countersigned by</p> <p style="text-align: center;">Stamp and signature of the SEMP Coordinator at the hosting University</p> <p style="text-align: center;">_____</p>	<p>Authorized by</p> <p style="text-align: center;">Stamp and signature of the SEMP Departmental Coordinator at the sending University</p> <p style="text-align: center;">_____</p>
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