

**ECTS - EUROPEAN CREDIT TRANSFER SYSTEM  
STUDENT APPLICATION FORM**

(Photograph)

**ACADEMIC YEAR 2009/2010 FIELD OF STUDY:** .....

This application should be completed in BLACK in order to be easily copied and/or telefaxed.

**SENDING INSTITUTION**

Name and full address: **Real Escuela Superior de Arte Dramático de Madrid (RESAD) Avenida de Nazaret , 2 Madrid 28009**

Department coordinator - name, telephone and telefax numbers, e-mail box .....

**Juan José de la Fuente; Avenida de Nazaret, 2, Madrid 28009; Tel. 915042151 Ext 106;  
[relaciones-internacionales@resad.com](mailto:relaciones-internacionales@resad.com)**

Institutional coordinator - name, telephone and telefax numbers, e-mail box:

**Ángel Martínez Roger, Director, Avenida de Nazaret, 2, Madrid 28009; Tel. 915042151;  
director@resad.es**

**STUDENT'S PERSONAL DATA** (to be completed by the student applying)

Family name: .....	First name (s): .....
Date of birth: .....	
Sex: .....Nationality:.....	
Place of Birth: .....	
Current address: .....	Permanent address (if different): .....
.....	.....
.....	.....
.....	.....
Current address is valid until: .....	.....
Tel.: .....	Tel.: .....

**LIST OF INSTITUTIONS WHICH WILL RECEIVE THIS APPLICATION FORM (in order of preference):**

	Institution	Country	Period of study		Duration of stay (months)	N° of expected ECTS credits
			from	to		
1.	.....	.....	.....	.....	.....	.....
2.	.....	.....	.....	.....	.....	.....
3.	.....	.....	.....	.....	.....	.....

Name of student: .....

Sending institution: .....

Country: .....

Briefly state the reasons why you wish to study abroad ?

.....  
.....

### LANGUAGE COMPETENCE

Mother tongue: ..... Language of instruction at home institution (if different): .....

Other languages	I am currently studying this language		I have sufficient knowledge to follow lectures		I would have sufficient knowledge to follow lectures if I had some extra preparation	
	yes	no	yes	no	yes	no
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)

Type of work experience	Firm/organisation	Dates	Country
.....	.....	.....	.....
.....	.....	.....	.....

### PREVIOUS AND CURRENT STUDY

Diploma/degree for which you are currently studying: .....  
Number of higher education study years prior to departure abroad: .....  
Have you already been studying abroad ? Yes  No   
If Yes, when ? at which institution ? .....

**The attached Transcript of records includes full details of previous and current higher education study. Details not known at the time of application will provided be at a later stage.**

Do you wish to apply for a mobility grant to assist towards the additional costs of your study period abroad?  
Yes  No

### RECEIVING INSTITUTION

We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate's Transcript of records.

The above-mentioned student is  provisionally accepted at our institution  
 not accepted at our institution

Departmental coordinator's signature

Institutional coordinator's signature

.....  
Date: .....

.....  
Date : .....

