



NOMINATION FORM

"ERASMUS MINISTER 2023"

A. UNIVERSITY / INSTITUTION

| University/Institution Name | |
|-------------------------------------|--|
| (in English) | |
| University/Institution Name | |
| (in national language) | |
| ERASMUS Code | |
| Initiation year of ERASMUS | |
| Programme in your country | |
| University/Institution Address | |
| (number, street, postal code, city) | |
| Country | |

B. NOMINATION OF ERASMUS INSTITUTIONAL COORDINATOR

| Surname/Given name | |
|--|--|
| (in English) | |
| Gender | |
| (Male or Female) | |
| Nationality | |
| Telephone (start with country code) | |
| Email Address | |
| Academic discipline or work section | |
| Number of years as an ERASMUS Institutional Coordinator | |

C. RECTOR'S CONTACT DETAILS

| Name Surname (in English) | |
|------------------------------|--|
| Telephone | |
| Email Address | |

| (signature) |
|-----------------------------------|
| Erasmus Institutional Coordinator |
| Date: |

(signature and stamp) Rector

Date: