

Application for Comenius International Partnership Program for International Guests

To the Prorectorate for

International and Lifelong Learning

Prorektorat-Internationales-LLL@uni-siegen.de

1. General information	
a. Applicant at the University of Siegen	
Form of address:	Title / Official designation:
First name:	Last name:
School/Department/Working Group:	
Phone:	Email:
b. Person to be invited	
Form of address:	Title / Official designation:
First name:	Last name:
Address:	
Phone:	Email:
c. Sending institution	
Name:	
Address:	
d. The person to be invited	
<input type="checkbox"/> is a first-time guest of the University of Siegen	
<input type="checkbox"/> was previously a guest at the University of Siegen (alumni)	
e. Period and duration of stay	
Beginning of stay:	End of stay:

f. Amount requested

Amount requested:

Cost breakdown of the requested amount (travel expenses, accommodation, etc.):

2. Objectives at the University of Siegen

a. Planned talks/projects

Visit plan (max. 1 page):

b. Added value for the University of Siegen (max. 0.5 pages)

3. Attachments (please enclose): Curriculum vitae of the person to be invited

Place, date

Signature of applicant