**Application for IPSAS mobility program**

|  |  |
| --- | --- |
| **Name of the applicant** |  |
| **Affiliation of the applicant\*** |  |
| **Full address of the applicant\*** |  |
| **Passport/ID number\*** |  |
| **Place of stay** |  |
| **Contact/Host person**  |  |
| **Estimated time of visit** |  |

**Budget estimation**

|  |  |  |  |
| --- | --- | --- | --- |
| **per diems** | **accommodation** | **travel expenses** | **Total requested budget** |
|  |  |  |  |

**Bank details\***

|  |  |
| --- | --- |
| Account name |  |
| Name of the bank |  |
| IBAN |  |
| **SWIFT/BIC Code** |  |

**Visit program and motivation**

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|  |

**Signatures**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Applicant | Contact/Host person\* | Head of IPSAS department |

\* filled only by in-going applicants