![EU flag-Erasmus+_vect_POS [CMYK]]()

**APPLICATION FOR EXTENSION OF ERASMUS PLACEMENT**

**ACADEMIC YEAR: ………… / ………….**

**STUDENT:**

Student (name) ……………………………………………………………………………………………………

from the University of Lleida hereby applies for an extension of his/her Erasmus period of

at the host university / company..……………………………………………………………………………….

for …….…. additional months for the following reasons:

……………………………………………………………………………………………......………………….……………………………………………………………………………......……………………………………….

………………………………………………………………………………………………………………………

Student’s signature: ………………………………………..

Date: ………………………………………..

**HOST UNIVERSITY / COMPANY :** …….……………………………………………………………………..

The host university / company hereby authorises the above mentioned student to extend his/her Erasmus placement period for the above specified length, as long as the home university also agrees.

Signature: ……………………………………………….

Name: ………………………………………………

Date: …………………………….…………………

**HOME UNIVERSITY: University of Lleida**

The home university hereby authorises the above mentioned student to extend his/her Erasmus placement period for for the above specified length, as long as the host university / company also agrees.

Signature: ……………………………………………….

Name: ………………………………………………

Date: …………………………….…………………