**APPLICATION FOR INCREASE IN FINANCIAL SUPPORT WITHIN THE ERASMUS+ PROGRAMME ON GROUNDS OF SOCIO-ECONOMIC DISADVANTAGE 2018/2019**

1. **IDENTIFICATION OF THE APPLICANT**

|  |  |
| --- | --- |
| **Name and surname:** |  |
| **BUT personal number:** |  |
| **Date of birth:** |  |
| **Nationality:** |  |
| **Faculty:** |  |
| **Field of study:** |  |
| **Permanent address:** |  |

1. **MOBILITY SPECIFICATION**

|  |  |
| --- | --- |
| **Name of the host university:** |  |
| **Country:** |  |
| **Studying abroad from:[[1]](#footnote-1)** |  |
| **Studying abroad until:1** |  |
| **Total number of days:[[2]](#footnote-2)** |  |
| **Financial support/30 days** | EUR XXX |

1. **GROUNDS FOR THE REQUEST:**

I hereby apply for an increase in financial support within the ERASMUS+ programme for students studying abroad who come from socio-economically disadvantaged backgrounds, according to the definition set by the Centre for International Cooperation in Education (Dům zahraniční spolupráce) as well as laid out in the Erasmus+ Programme Rules for Studying Abroad, in the flat-rate amount of 200 EUR/30 days of the stay.

As an integral part of this application, I attach a written **Notice for the Purpose of Granting a Scholarship** or an equivalent document, or other supporting documentation issued by relevant State authority proving the fact that I am entitled to receive family allowance from the State of which I am a citizen for the period when I intend to study abroad, given that the net monthly family income assessed for the purposes of granting social benefits in the decisive period does not exceed the product of the minimum subsistence level according to the applicable laws[[3]](#footnote-3) and a coefficient of 1.5.

I acknowledge that if my entitlement for the family allowance ceases to exist during the decisive period, the entitlement for the increase of financial support within the Erasmus+ programme will also cease to exist and I shall inform the Foreign Relations Department of the BUT Rectorate accordingly without delay. I also acknowledge that BUT will claim back any financial support granted for a period in which I am not eligible to receive the support.

I hereby affirm that the information specified in this application and its annexes is complete and true.

In Brno, on:

………………………………………………

Signature of the applicant

♣

1. The date corresponds to the Participation Agreement according to the definitions regarding the first and the last day of the mobility for the purpose of calculation in the Erasmus+ Programme Rules for Studying Abroad as amended, published on BUT’s website. [↑](#footnote-ref-1)
2. The exact number of days can be verified using an online IT tool, also published on BUT’s website. [↑](#footnote-ref-2)
3. In the Czech Republic: Act No. 110/2006 Coll., on the living and subsistence minimum, Government Regulation No. 409/2011 Coll., on the increase in the amounts of the living and subsistence minimum.

   In the Slovak Republic: Act No. 601/2003 Coll., on living minimum, Decree of the Ministry of Labour, Social Affairs and Family of the Slovak Republic No. 186/2003 Coll., on changes to the amounts of the living minimum.

   Other locations: please consult the Foreign Relations Department of the BUT Rectorate [↑](#footnote-ref-3)