FOR FLEXIBLE STUDY RIGHTS

by only one faculty/department in one university.

1. PERSONAL DATA ON APPLICANT (for student to fill in) NB! Items marked with an asterisk (\*) are required information.

|  |  |  |
| --- | --- | --- |
| Date of birth | Date of birth (day xx, month xx, year xxxx)\* . .  | Final part of personal identification number \* (required for Finnish students) |
| Surname and given names | Surname \* | First names \* |
| Address | Street address \* |
| Postal code \* | City/municipality \* |
| Phone number | Mobile phone | Home phone |
| E-mail |  |
| Sex \* | Male | Female |
| Domicile \* | Domicile \* |
| Native country \* | Finland | Other, which:  |
| Nationality \* | Finnish | Other, which:  |
| Native language \* | Finnish | Swedish English Other, which:  |
| Language/languages of study (if others besides native language) |  |

1. EDUCATIONAL BACKGROUND OF APPLICANT (for student to fill in)

|  |  |
| --- | --- |
| Home university \* |  |
| Student registration number\* |  |
| Faculty/Department and Study programme/Major subject | Faculty/Department \* | Study programme/Major subject (or equivalent) \* |
| Degree in which courses applied for are intended to be included | Degree \* |
| Start date of degree studies \* | Estimated date of completion of degree studies \* |
| Completed studies | Number of study credits completed by the time of application (study weeks/ECTS) \* | Number of study credits completed in major subject(or corresponding) by the time of application(study weeks/ ECTS) \* |
| Earlier JOO studies | Have you been granted JOO study rights before \* No Yes |
| Start and end periods and receiving universities of earlier JOO studies |
| Additional information related to educational background |  |

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1. JOO STUDIES APPLIED FOR (for student to fill in) NB! Items marked with an asterisk (\*) are required information.

|  |  |
| --- | --- |
| Receiving university/unit \* |  |
| Faculty/Department \* |  |
| JOO studies applied for \* | Study programmeSubject Study programme and extent (credits) Specify in the table below the study modules/courses, their extent in credits awarded, and time of completion.Courses / study modulesIndicate in the table below the courses applied for, their extent in credits awarded, and time of completion. |
| Study modules/courses included in study programme | Name of study module \* | Study module code | Extent of study module (study weeks/ECTS)\* | Term/semester in which you plan to complete the studies \* |
| or | 1 |  |  |  |
|  |  |
| Separate study modules/courses | 2 |  |  |  |
|  | 3 |  |  |  |
|  | 4 |  |  |  |
|  | 5 |  |  |  |
|  | 6 |  |  |  |
|  | 7 |  |  |  |
|  | 8 |  |  |  |
|  | 9 |  |  |  |
|  | 10 |  |  |  |
|  | 11 |  |  |  |
|  | 12 |  |  |  |
| The studies applied for will be included in degree studies for \* | Major subject Minor subject | Optional studies Elective or other studies |  |
| Grounds for applying for these study rights \* |  |
| Signature of the applicant | Date and place \* |  | Signature and clarification of signature \* |

|  |  |
| --- | --- |
| StatementThe student may include the accepted studies in a degree to be completed at the student's home university, while the homeuniversity undertakes to pay for the studies completedby the student in accordance with the valid JOO agreement. | We endorse the granting of study rights for the period  |
| The application is endorsed with the following changes: |
| The application is not endorsed |
| Study transcriptGrounds for declining the application or parts of it | Study transcript attached |
| Signature of the decision maker/processing officialStamp of the home university | Date, signature and clarification of signature Stamp of the home university |
| Processing official | Name | Position |
| Phone number | E-mail |



|  |  |
| --- | --- |
| Decision | Study rights are granted for the period  |
| Study rights are granted with the following modifications:Study rights are not granted |
| Grounds for declining the application or parts of it |  |
|  |
| Invoicing | The granted study rights are not included within the JOO reimbursement system. Indicate the reason for not sending an invoice. |
| Signature of decision maker(s) /processing officialStamp of the receiving university | Date, signature and clarification of signature Stamp of the receiving university |
| Processing official | Name | Position |
| Phone number | E-mail |

