

**ERASMUS CONGRESS AND EXHIBITION 2023**

**24-28 June 2024, Portugal**

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1. **UNIVERSITY / INSTITUTION**

**NOMINATION FORM**

“*ERASMUS MINISTER 2024*”

|  |  |
| --- | --- |
| University/Institution Name(in English) |  |
| University/Institution Name(in national language) |  |
| ERASMUS Code |  |
| Initiation year of ERASMUSProgramme in your country |  |
| University/Institution Address(number, street, postal code, city) |  |
| Country |  |

1. **NOMINATION OF ERASMUS INSTITUTIONAL COORDINATOR**

|  |  |
| --- | --- |
| Surname/Given name(in English) |  |
| Gender(Male or Female) |  |
| Nationality |  |
| Telephone (start with country code) |  |
| Email Address |  |
| Academic discipline or work section |  |
| Number of years as an ERASMUS Institutional Coordinator |  |

1. **RECTOR’S CONTACT DETAILS**

|  |  |
| --- | --- |
| Name Surname(in English) |  |
| Telephone |  |
| Email Address |  |

(signature)

Erasmus Institutional Coordinator Date:

Date:

(signature and stamp)

Rector

Please send this form by email at info@eracon.eu Deadline: 31 May 2024