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| **Application for International Mobility - IFMSA internship**  *Please, fill in and submit the application to the Foreign Department, Miss Stanislava Palowska, email:* [*stanislava.palowska@lfmotol.cuni.cz*](mailto:stanislava.palowska@lfmotol.cuni.cz)***at least 14 days before your planned departure abroad.*** *In order to receive a financial support from the Faculty, your application must be approved in advance. At the same time, it is necessary to register your internship in the SIS online application. Thank you.* | |  |  |
| **Surname:** |  |  |  |
| **First name (s):** |  |  |  |
| Study programme: |  |  |  |
| Year of study/ study group: |  |  |  |
| Email: |  |  |  |
| Mobile: |  |  |  |
| Destination – *country, city and host institution of your internship:* |  |  |  |
| Dates/term – *from when till when you are planning to go abroad on IFMSA internship:* |  |  |  |
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| *Upon my return I will submit a confirmation of the IFMSA internship (signed by the guarantor*  *of the host institution).* | | | |
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| Date: | Signature: |  |  |
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