



NOMINATION FORM

"ERASMUS MINISTER 2026"

The same person cannot receive the same award before 10 years pass.

Δ	IINIVERSITY	/ INSTITUTION

A. UNIVERSITY / INSTITUTION	
University/Institution Name	
(in English)	
University/Institution Name	
(in national language)	
ERASMUS Code	
Initiation year of ERASMUS	
Programme in your country	
University/Institution Address	
(number, street, postal code, city)	
Country	
B. NOMINATION OF ERASMUS INSTITUTION	IAL 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	
C. RECTOR'S CONTACT DETAILS	
Name Surname	
(in English)	
Telephone	
Email Address	

(signature) (signature and stamp) Erasmus Institutional Coordinator Rector

Date: Date: