



To: Post Graduate Students (M.Sc. Statistics) working in the field of Finance and Insurance.

From: Erasmus+ Selection Committee, SKUAST-Jammu

Subject: Call for Applications: Student Mobility for Studies 2025-2026 (Italy)

SKUAST-Jammu, in collaboration with the University of Calabria, Italy is pleased to announce a call for applications under the Erasmus+ International Credit Mobility project. This program provides an opportunity for post graduate students to study abroad and earn credits that are recognized by SKUAST-Jammu.

1. Mobility Overview

- **Project Code:** 2024-1-IT02-KA171-HED-000232521.
- **Host Institution:** University of Calabria, Italy.
- **Target Group:** Post Graduate students: M.Sc. Agricultural Statistics.
- **Duration:** 5 months during the second semester of the 2025-2026 academic year (February 2026 – July 2026).
- **Available Places:** 2 places.

2. Financial Support

- **Individual Support:** €900 per month.
- **Travel Grant:** €1,735 (contribution to travel costs).
- **Inclusion Top-up:** An additional €250 per month is available for students with fewer opportunities.
- **Tuition:** Beneficiaries receive a tuition waiver from the host university while continuing to pay fees to SKUAST-Jammu.

3. Eligibility and Selection

- **Academic Merit:** Primary selection is based on academic merit (Minimum score of 70 points).
- **Language:** English proficiency at level B2 (IELTS, TOEFL, or institutional test).
- **GPA Requirements:** Minimum GPA of 7.5 for professional subjects.
- **Application Deadline:** January 10, 2025.

How to apply:

Submit complete application form along with all required documents (self attested) in the office of Division of Statistics and Computer Science by 10th January 2025.

Contact person:

Professor & Head

Division of Statistics & CS

APPLICATION FOR ERASMUS+ STUDENT MOBILITY FOR STUDIES

Academic Year 2025-2026

Host Institution: University of Calabria, Italy

Sending Institution: SKUAST-Jammu

SECTION 1: PERSONAL DETAILS

- **Full Name (as per Passport):** _____

- **Date of Birth (DD/MM/YYYY):** _____

- **Gender:** _____ **Nationality:** _____

- **Passport/ID Number:** _____ **Expiry Date:** _____

- **Permanent Address:** _____

- **Email Address:** _____ **Phone Number:** _____

SECTION 2: ACADEMIC PROFILE (SKUAST-JAMMU)

- **Current Program of Study: (tick the relevant box)**

MBA ABM

M.Sc. Agricultural Economics

M.Sc. Agricultural Extension Education

M.Sc. Statistics (working in Finance/Insurance)

- **Current Semester/Year:** _____ **Student ID:** _____

- **Current OGPA (Professional Subjects):** _____ (Min. 7.5 required)

- **Previous Erasmus+ Mobility:** Have you previously participated in Erasmus+ or Erasmus Mundus?

No

Yes (If yes, specify duration in months: _____)

SECTION 3: INCLUSION AND SPECIAL NEEDS SUPPORT

SKUAST-Jammu and the Erasmus+ program prioritize participants with fewer opportunities.

- **Do you belong to any of the following categories? (Check all that apply):**

Economically Disadvantaged: (Low income status)

Physically Disadvantaged: (Individual physical, mental, or health-related situation)

Ethnic Minority: (Belonging to a recognized ethnic minority group)

SECTION 4: LANGUAGE PROFICIENCY

- **English Level:** B2 C1 C2
- **Certification Type:** * International Certificate (IELTS, TOEFL, CAE)
 Institutional Language Test (SKUAST-Jammu)

SECTION 5: MANDATORY ATTACHMENTS CHECKLIST

Please ensure all documents are in English or accompanied by an English translation.

- Copy of valid ID card and Passport
- Copy of residence document
- Copy of Bachelor degree
- Official Transcripts of Records (University grades/marks)
- Copy of official language certifications (IELTS etc)
- Proposed Learning Agreement (Signed by you and SKUAST Coordinators)
- Motivation Letter (Max 2 pages)
- Curriculum Vitae (Max 2 pages)
- Proof of socio-economic/physical disadvantage (if applicable)
- Recommendation letters and other supporting documents in english

SECTION 6: DECLARATION AND SIGNATURE

1. I confirm that I am enrolled at SKUAST-Jammu and will remain so for the duration of the mobility.
2. I understand that if any information is found to be knowingly falsified, I will be disqualified.
3. I agree to reimburse the grant if I fail to complete the program or submit the final report.
4. I declare that I will not benefit from any other EU grant for this same mobility period.

Date: _____ **Signature:** _____