**MEMBER DETAILS**

**University of Belgrade member details:**

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**Faculty/Institute of the University of Belgrade:**

Faculty of Medicine

**Dean/Director:**

Prof. dr Nebojša Lalić

**ECTS coordinator**

**ECTS coordinator name**

Tanja Jovanović

**E-mail**

tanja.jovanovic@med.bg.ac.rs

**Phone**

+381 11 3636300

**Administrative contact**

**Administrative contact name**

Uroš Tošić

**E-mail**

uros.tosic@med.bg.ac.rs

**Phone**

+381 11 3636396

**INFORMATION ABOUT THE PARTNER UNIVERSITY**

За сваку иницијатриву за сарадњу потребно је навести академски и административни контакт на конкретној партнерској институцији у иностранству, као и контакт академског координатора на факултету/институту Универзитета у Београду, тј. катедру са које је потекла иницијатива.

За сваку иницијативу за сарадњу наводи се укупан број мобилности за реализацију током обе академске године (2020/21. И 2021/22)

**General information**

Country

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Official name of the partner university in English

City

Postcode

Address

Rector/Legal Representative

Official Internet Page (homepage)

PIC Code

**IRO/Erasmus+ administrative contact**

IRO/Erasmus+ administrative contact name

E-mail

Phone

Additional information (IRO)

**Academic contact**

Academic contact name

Faculty/Department

E-mail

**Information about the Academic coordinator of the cooperation at the applicant Faculty/Institute of the University of Belgrade**

**Academic Coordinator**

**Department at the UB Faculty/Institute**

**E-mail**

**Phone**

**MOBILITY NUMBERS**

**Outgoing student mobility**

**Sending institution:** Faculty of Medicine

**Receiving institution:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of teaching mobilities** | **Duration of each mobility in months** | **Subject area code/name ISCED 2013** | **Study cycle (1st, 2nd, 3rd)** |
|  |  |  |  |

**Incoming student mobility**

**Sending institution:** Faculty of Medicine

**Receiving institution:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of teaching mobilities** | **Duration of each mobility in months** | **Subject area code/name ISCED 2013** | **Study cycle (1st, 2nd, 3rd)** |
|  |  |  |  |

**Outgoing teaching mobility**

**Sending institution:** Faculty of Medicine

**Receiving institution:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of teaching mobilities** | **Duration of each mobility days** | **Subject area code/name ISCED 2013** | **Study cycle (1st, 2nd, 3rd)** |
|  |  |  |  |

**Incoming teaching mobility**

**Sending institution:** Faculty of Medicine

**Receiving institution:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of teaching mobilities** | **Duration of each mobility days** | **Subject area code/name ISCED 2013** | **Study cycle (1st, 2nd, 3rd)** |
|  |  |  |  |

**Outgoing mobility for training**

**Sending institution:** Faculty of Medicine

**Receiving institution:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of teaching mobilities** | **Duration of each mobility days** | **Subject area code/name ISCED 2013** | **Study cycle (1st, 2nd, 3rd)** |
|  |  |  |  |

**Incoming mobility for training**

**Sending institution:** Faculty of Medicine

**Receiving institution:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Number of teaching mobilities** | **Duration of each mobility days** | **Subject area code/name ISCED 2013** | **Study cycle (1st, 2nd, 3rd)** |
|  |  |  |  |

**LANGUAGE REQUIREMENTS**

Language requirements set by the Faculty/Institute of the University of Belgrade

Teaching/Working Language

English

Serbian

Other

Incoming student must provide the proof of proficiency in the following language(s)

English

Serbian

Official certificate is not required

Other

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#### Required level of language proficiency for incoming students (A1, A2, B1, B2, C1, C2)

|  |  |  |
| --- | --- | --- |
| Serbian | English | Other |
|  |  |  |

#### Required level of language proficiency for incoming lecturers and staff (A1, A2, B1, B2, C1, C2)

|  |  |  |
| --- | --- | --- |
| Serbian | English | Other |
|  |  |  |

**RELEVANCE OF THE PROPOSED COOPERATION**

We strongly encourage you to contact your potential partners for help in providing the relevant information regarding their institution and the overall project proposal.

Please explain the relevance of the proposed cooperation (must be between 1000 and 2000 characters for all fields)

Why is the mobility towards the selected Region/Country strategic for your institution and for your internationalization strategy?

Please analyze the overall interest of your institution in strengthening the mobility with universities in the selected Region/Country and then examine in depth the interest towards the specific target-university.

**Justify the type(s) of mobility proposed in your project application:**

**Students for studies:**

**Students for traineeships**

**Staff for teaching**

 **Staff for training**

How the proposed cooperation fits in with the Strategy for the Internationalization and other relevant strategies\* of the University of Belgrade? (must be between 1000 and 2000 characters)

 Please visit [this link](https://bg.ac.rs/files/en/international/Strategy-Internationalisation.pdf) to find the strategies of the University of Belgrade

**Quality of the cooperation arrangements**

Quality of the cooperation arrangements (must be between 1000 and 2000 characters for all fields)

Please describe your previous experience of mobility with universities in the selected Region/Country/University (type and titles of all respective projects, if applicable, number of students incoming and outgoing moved per year, source of funding, any other information you may find relevant to support your application).

Please describe your current experience of mobility with universities in the selected Region/Country/University (projects, number of students incoming and outgoing moved per year, source of funding).

If applicable, provide the available information regarding organizing traineeships in your country and in the partner country.

If applicable, provide information regarding planned cooperation for traineeships in your country and in the partner country.

Quality of project design and implementation

Quality of project design and implementation (must be between 1000 and 2000 characters for all fields)

Present different phases of the mobility project.

Summarize what your institution and the partner organization plan in terms of selection of participants.

Summarize what kind of support your institution and the partner organization plan to provide to participants.

Summarize what kind of support at your institution and the partner organization plan to provide to participants

Summarize the recognition procedure of implemented mobility flows at your institution and the partner organization.

Quality of project design and implementation

Impact and dissemination (must be between 1000 and 2000 characters for all fields)

Explain the desired impact of the mobility project:

**On participants**

**On beneficiaries**

**On partner organizations**

**at local, regional and national levels**

**At local, regional and national levels**

Describe the measures which will be taken to disseminate the results of the mobility project at faculty and institution levels, and beyond where applicable, in the Programme Countries.

Describe the measures which will be taken to disseminate the results of the mobility project at faculty and institution levels, and beyond where applicable, in the **Partner** Countries.