



Notification of Changes for Erasmus exchange

Name: _____

Date of birth: ____-____-____

Email: _____@_____

Faculty at University of Helsinki: _____

Name of the host university: _____

Original exchange period: ____-____-____ - ____-____-____

New exchange period*: ____-____-____ - ____-____-____

*For exchange extensions: An additional grant requires a minimum extension of 14 days. In order to qualify for the additional grant, the 5 cr/exchange month must be achieved for the entire duration of the exchange, including the extension period. With the exception of semester-long extensions, the additional grant will be paid after the mobility after all grant conditions have been fulfilled.

By sending this document to studentexchange@helsinki.fi I confirm that the information given in this form is true, complete and accurate



Erasmus+