**Pécs Summer School 2018**

**Student Application Form**

18 July – 15August ,,2018

|  |  |
| --- | --- |
| First name:  |   |
| Last Name:  |   |

**I. CONTACT DETAILS:**

|  |  |
| --- | --- |
| Address:  |   |
| ZIP Code: |   |
| City: |   |
| Country:  |   |
| Mobile phone:  |   |
| Home phone:  |   |
| E-mail:  |   |

**II. PERSONAL DATA:**

|  |  |
| --- | --- |
| Date of Birth: |   |
| Gender:  |   |
| Nationality:  |   |
| Passport number:  |   |
| Language(s) spoken:  |   |

**III. INFORMATION ON STUDIES:**

|  |  |
| --- | --- |
| Home university: |  |
| Major/main field of study: |   |
| Current year of study: |   |
| Expected year of graduation: |   |
| Degree: |   |

**IV. EMERGENCY CONTACT INFORMATION**

|  |  |
| --- | --- |
| First name: |   |
| Last name: |   |
| Home phone: |   |
| Mobile phone: |   |
| Work phone: |   |
| Email:  |   |
| Relation to you: |   |

**VII. ENGLISH LANGUAGE**

Please give details of your English language qualifications:

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**VIII. SPECIAL NEEDS**

Please outline any special needs, support that you may require in order to fully undertake your studies as a consequence of any disability or medical condition.

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I certify that the information I have provided is true and correct and understand that the university has the right to withdraw any offer made or cancel any registration if any of these statements prove to be incorrect. I accept full responsibility for the information provided on this form. If I am accepted on the program I agree that I will comply with all the governing conditions.

Signature: ……………………………………………………………………………………….

Date: ……………………………………………………………………………………………….