|  |  |
| --- | --- |
| http://kneu.edu.ua/userfiles/evrointegracii/Logo_KNEU_ENG-short.png | **Student Application Form**  **Academic Year 201\_/201\_** |
| **Deadlines: Autumn Semester: 30 November**  **Spring Semester: 30 June** |
| \*To complete this form:  - Answer all questions in the form  - Fill in electronically, not handwritten |

**STUDENT`S PERSONAL DATA**

|  |  |  |  |
| --- | --- | --- | --- |
| Surname: |  | | **(Photograph)** |
| First name: |  | |
| Date of birth (dd/mm/yyyy): |  | |
| Place of birth: |  | |
| Gender: |  | |
| Nationality: |  | |
| ID/Passport number: |  | |
| Tel.: |  | |
| E-mail: |  | |
| Permanent address | Street and number: |  | |
| Town/City: |  | |
| Country: |  | |
| Postal Code |  | |
| Correspondence address (if different) | Street and number: |  | |
| Town/City: |  | |
| Country: |  | |
| Postal Code |  | |
| Person in home country to contact in case of emergency | Name: |  | |
| Tel.: |  | |
| E-mail: |  | |

**STUDENT`S STUDYING DETAILS**

|  |  |  |
| --- | --- | --- |
| Name of home university: |  | |
| City: |  | |
| Country: |  | |
| Address: |  | |
| Erasmus code: |  | |
| Faculty/Department at home university: |  | |
| Diploma/Degree for which you are currently studying: |  | |
| Current year of study: |  | |
| Exchange coordinator at home university | Name: |  |
| Title: |  |
| Tel.: |  |
| E-mail: |  |

**LANGUAGE COMPETENCE**

|  |  |  |  |
| --- | --- | --- | --- |
| Native language: |  | | |
| Language of instruction at home university (if different): |  | | |
| Other languages: | I have basic knowledge of this language | I have sufficient knowledge to follow lectures | Language certificate |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

**ACCOMMODATION**

|  |  |
| --- | --- |
| Please specify if you are interested in applying for accommodation in the University Dormitories: | Yes □ |
| No □ |

**SUPPORT SERVICES**

|  |  |
| --- | --- |
| Do you have any disability, impediment or long-term medical condition that may affect your studies? | |
| Yes □ |  |
| No □ | |

|  |  |
| --- | --- |
| **Date:** | **Student`s signature:** |

**SENDING INSTITUTION:**

|  |  |
| --- | --- |
| We confirm that above-mentioned student has been officially nominated for study visit and information provided on this application form is correct. | |
| Date: | Institutional coordinator`s signature: |
| Stamp: | Name: |
|  | Title: |

**RECEIVING INSTITUTION: Kyiv National Economic University named after Vadym Hetman (Kyiv, Ukraine)**

|  |  |
| --- | --- |
| We hereby acknowledge receipt of the application.  The above-mentioned student is:  □ provisionally accepted at our institution  □ not accepted at our institution | |
| Date:  Stamp: | Institutional coordinator`s signature:  Name: Ievgeniia Kolomiiets Liudvig  Title: Director of the Centre of International Academic Mobility |