**Template: Summer school student application form**



**STUDENT APPLICATION FORM**

**Name of Summer School/Intensive Programme**

**Year of Summer School/Intensive Programme**

**Organising university, Faculty**

**Address**

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| Please complete before print; sign and send this form to:International Relations Office (IRO) or course responsible at your home university (see course description)[http://www.euroleague-study.org](http://www.euroleague-study.org/en/programs/intensive/index.php)**Application deadline: day, month, year** |
| Personal data |
| Family name: |
| First name(s): | Male: |  | Female: |  |
| Date of birth: (date/month/year) | Nationality: |
| Name of home university:  |
| Name and address of academic contact person (course responsible) at home university:  |
| Current address |
| Street and No.: |
| Telephone No.: | E-mail: |
| Postal code and city: | Country: |
| Academic profile  |
| Degree presently pursued (bachelor / master / doctoral) | Major field(s) of study: |
| Month and year of enrolment: | Student registration number: |
| Language proficiency in English:Indicate level: Poor Moderate Good |
| Alternative/Parents address (in case of emergency during the summer school) |
| Name: | Relationship:  |
| Street and No.: |
| Postal code and city: | Country: |
| Telephone No. (incl. international prefix): private/work) | Fax No.: | E-mail: |
| **Motivation for participation in the summer university. Relevant prior studies/ academic background, additional possible accompanying documents: English language certificate, transcript of records:** |
| **Signature of applicant**I wish to apply for: Title of Summer School/Intensive Programme , year, name and faculty of the organizing university By accepting and submitting the present form to the Euroleague for Life Science, I agree to the processing of my personal data for the purpose of organizing and conducting the Summerschool "…" in accordance with the General Data Protection Regulation (EU-GDPR).I hereby confirm that the above information is correct |
| Date: | Signature: |
| **Signature of IRO representative at home university**I hereby confirm the nomination of the student for participation in the summer university. |
| Date: | Signature: |