

Subject of education¹ A or B

**APPLICATION FORM²
FOR A HUNGARIAN UNIVERSITY SCHOLARSHIP AND THE
COMPLETE COSTS OF EDUCATION (2009)³**

Family name (as in passport):				Please afix photograph here	
Given name(s) (as in passport):					
Home country /Citizenship (if other):					
Date of birth (day/month/year):		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Place of birth (city / country):		
Gender	Male	Female	Marital status	Single	Married
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
<i>Passport No/ or other identity card No</i>					
Current Residential Address					
Street, Nr.:					
Suburb, Town:					
Postcode, Country:					
Home Tel. N°. (incl. Area Code):				E-mail:	
Postal Address (if different):					

EDUCATIONAL BACKGROUND

Higher Educational Institution/Location	Years attended (from-to)	Degree and Field of study
1.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
2.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
3.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

¹ A—Agricultural Engineering; B - Plant Protection

² Two- round application: first round on the basis of this application form; second round at the university

³ Travel costs to and from Hungary not included

SCHOLARSHIP PROGRAMME - HUNGARIAN MINISTRY OF AGRICULTURE AND RURAL DEVELOPMENT

Language	excellent	good	fair	poor	level and name of official exam
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hungarian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

OCCUPATION

Name of Employer, Address	
Occupation	

OTHER

1. Fellowships previously awarded	
2. Have you previously studied or worked in Hungary? If so, please specify	
3. Plans after the completion of studies	
3. Any other comments:	

This form is to be completed in 2 copies in English (one of them must be original). Forms filled in any other languages will not be processed.

Please remember to enclose the following documents (either in English or in Hungarian) with the application form in two copies:

- curriculum vitae
- a copy of the degree
- a letter of recommendation from one person (If you are a student from your school, if you are currently working, from your workplace.)
- bill of health
- statement of clean criminal record

I hereby certify that all information given in this form are true and correct.

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Date

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Applicant's signature