



## A.T.E.I OF THESSALONIKI STUDENT APPLICATION FORM

**ACADEMIC YEAR:** 20\_\_\_/20\_\_\_

**photo**

**FIELD OF STUDY:** \_\_\_\_\_

<b>SENDING INSTITUTION: (name)</b>	
ERASMUS CODE:	Department of study:
FULL ADDRESS:	
Department Coordinator:	International Office Coordinator:
Telephone: e-mail:	Telephone: e-mail:

<b>STUDENTS PERSONAL DATA</b>		
Family name:	First name:	
Date of Birth:	SEX:	Nationality:
Address:		
Telephone:	e-mail:	

<b>LANGUAGE COMPETENCE</b>				
Mother tongue: _____ Language of instruction at home Institution: _____				
FOREIGN LANGUAGE	GOOD	VERY GOOD	PERFECT	DEGREE
ENGLISH				
FRENCH				
GERMAN				
SPANISH				
OTHER				

<b>PREVIOUS AND CURRENT STUDIES</b>				
Diploma/Degree for which you are already studying:				
Number of higher education study years prior to departure abroad:				
Have you already been studying abroad:	YES		NO	
If yes when:	At which Institution:			

<b>RECEIVING INSTITUTION: ATEI OF THESSALONIKI</b>			
We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate's Transcript of records			
The above mentioned student is:			
accepted at our institution		not accepted at our institution	
Departmental coordinator's signature	Institutional coordinator's signature		
Date:	Date:		

This application should be completed electronically, in order to be easily copied and/or scanned and accompanied by a copy of your ID or Passport