

***University of Craiova***

**13, Al.I. Cuza Street, Craiova, postal code: 200585,**

**Phone/ Fax: +40-251-419030**

[**www.ucv.ro**](http://www.ucv.ro)

# STUDENT APPLICATION FORM

**(Photograph)**

**ACADEMIC YEAR ……..**

**FIELD OF STUDY: (subject area: )**

*This application should be completed in BLACK in order to be easily copied and/or telefaxed.*

**SENDING INSTITUTION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | | | |
| Full address |  | | | |
| Department coordinator | Name |  | | |
| Telephone |  | Fax |  |
| E-mail |  | | |
| Institution coordinator | Name |  | | |
| Telephone |  | Fax |  |
| E-mail |  | | |

**STUDENT’S PERSONAL DATA** *(to be completed by the student applying)*

|  |  |  |
| --- | --- | --- |
| Family name (surname) |  | |
| First name (given name) |  | |
| Sex | male female | |
| Current nationality |  | |
| Place of birth (country, town) |  | |
| Date of birth (dd/mm/yy) |  | |
| Current address |  | |
| Valid until |  |
| Telephone |  |
| Permanent address  (if different) |  | |
| Telephone |  |
| E-mail |  | |

**EMERGENCY CONTACT (IN HOME COUNTRY)**

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name | Relationship to Applicant | Home Phone Number | Mobile Phone Number |
|  |  |  |  |

**DESIRED PERIOD OF STUDY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Period of study | | | Duration of stay (months) | N° of expected ECTS credits |
| From | To |  |
|  | |  |  |  |
|  | |  |  |  |
|  | |  |  |  |

Briefly state the reasons why you wish to study at the University of Craiova?

.......................................................................................................….................................................................

.........................................................................................................…...............................................................

............................................................................................................................................................................

.........................................................................................................…...............................................................

............................................................................................................................................................................

**LANGUAGE COMPETENCE**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Mother tongue | | | |  | | | |
| Language of instruction at home institution (if different) | | | |  | | | |
| Other languages | I am currently studying this language | | I have sufficient knowledge to follow lectures | | | I would have sufficient knowledge to follow lectures if I had some extra preparation | |
| yes | no | yes | | no | yes | no |
|  | 🞏 | 🞏 | 🞏 | | 🞏 | 🞏 | 🞏 |
|  | 🞏 | 🞏 | 🞏 | | 🞏 | 🞏 | 🞏 |
|  | 🞏 | 🞏 | 🞏 | | 🞏 | 🞏 | 🞏 |

**EDUCATIONAL BACKGROUND**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of institution (High school) | Date of attendance  from-to | Major | Location  (city, country) |
|  |  |  |  |

**CURRENT STUDY**

|  |  |  |
| --- | --- | --- |
| Name of home institution | Major | Currently enrolled  School year (Grade level) |
|  |  |  |

|  |  |
| --- | --- |
| Have you already studied abroad? | If Yes, when? At which institution? |
| Yes 🞏 No 🞏 |  |

***I certify that all the information I have given above are accurate and complete to the best of my knowledge and if it is proven that the information I provided herewith contains any kind of falsehood or omission, I understand that I could be subject to legal actions and I will take legal responsibility.***

***I oblige myself to observe the laws in force in Romania, the school and university rules, regulations and norms, as well as those for social life.***

Student's signature Date:

**SENDING INSTITUTION**

Departmental coordinator's signature Institutional coordinator's signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: Date: