HELLENIC REPUBLIC MINISTRY OF FOREIGN AFFAIRS E1 DIRECTORATE OF EDUCATIONAL AND CULTURAL AFFAIRS

SCHOLARSHIP PROGRAM – ACADEMIC YEAR 2019/20 APPLICATION FOR A SCHOLARSHIP FOR UNDERGRADUATE STUDIES IN GREECE

(You are kindly requested to answer each question as clearly and fully as possible in capital letters. If more space is needed, please continue on a separate sheet and attach it to this form).

The undersigned, a Secondary
Education graduate, applies for an undergraduate studies scholarship at a
Greek University or Institute of Technology.
PERSONAL DATA
1. Mr. Ms.
1. Mr Ms 2. Surname
3.First name(s)
4.Father's name
5. Mother's name
6.Place of birth
7.Date of birth
8.Citizenship
9.Please mention if of Greek origin
10. Marital Status: Single Married
11. Name and age of dependents
12.Current occupation
13. Address(please write out the postal address of your permanent residence)
14. Telephone number(s)
e-mail)FAX

STUDIES Subject of planned studies. Please state a	at least 3 choices:
1	
2	
3	
Mother tongueForeign languages (excellent-good-basic	knowledge,please state)
- Do you already hold a scholarship from Institution or Organization, in Greece or Please, specify	n the Greek Government or any other abroad?
- Were you awarded a scholarship from Greek entity in the past? Please, specify	n the Greek Government or any other
- Have you currently applied for another yes, please specify	r scholarship, in Greece or abroad? If
- Has any other member of your immed husband or wife) held a Greek schol specify	liate family (parent, brother or sister, arship, now or in the past? Please
I hereby confirm that I have read the scagree to be bound by them.	
(place)	(date)
	t's signature)

YOU ARE KINDLY REQUESTED TO KEEP A COPY