 Postgraduate

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

SCHOLARSHIP PROGRAM - ACADEMIC YEAR 2018/19
APPLICATION FOR A SCHOLARSHIP FOR POSTGRADUATE STUDIES IN GREECE

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

The undersigned ....., a Higher Education graduate, herewith applies for postgraduate studies / P.H.D. at a Greek University to which I have been accepted.

PERSONAL DATA

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. Ethnic background (Greek and/or other: please specify:)
10. Marital Status: Single ☐ Married ☐.....
11. Name and age of dependents.....
12. Current occupation.....
13. Address (please write out the postal address of you permanent residence).....
14. Telephone number(s).....
(e-mail).....FAX.....

STUDIES

Educational Institution of graduation.....
.....
Place (country, town).....
Degree in.....

Postgraduate course in Greece (or P.H.D,) at which you have been accepted.
.....
.....
.....
What will your plans be after you have finished your postgraduate studies?
.....
.....
.....
Other information.....
- Do you already hold a scholarship from the Greek Government or any other Institution or Organization, in Greece or abroad? Please, specify.
.....
.....
- Did you obtain a scholarship from the Greek Government or any other Greek entity in the past? Please, specify:.....
.....
- Have you currently applied for another scholarship, in Greece or abroad? If yes, please specify:.....
.....
- Has any other member of your immediate family (parent, brother or sister, husband or wife) held any Greek scholarship, now or in the past?
Please, specify.....
.....

I hereby confirm that I have read the scholarship terms and conditions and I agree to be bound by them.

....
(place) (date)

.....
(applicant's signature)

YOU ARE KINDLY REQUESTED TO KEEP A COPY