



(photo)

**HELLENIC REPUBLIC
MINISTRY OF FOREIGN AFFAIRS
HELLENIC AID**

**SCHOLARSHIP PROGRAM – ACADEMIC YEAR 2010-11
SCHOLARSHIP APPLICATION FOR UNDERGRADUATE 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
Secondary Education graduate, applies herewith for a scholarship for undergraduate studies in a
Greek University.

PERSONAL DATA

Mr.		Ms.	
1. Surname name:			
2. First name:			
3. Father's name:			
4. Mother's name:			
5. Current occupation:			
6. Father's occupation:			
7. Mother's occupation:			
8. Place of birth:			
9. Date of birth:			
10. Nationality:			
11. Other Nationalities:			
12. Passeport Number :		Issuing Authority :	
13. Sex:	Male	<input type="checkbox"/>	Female <input type="checkbox"/>
14. Marital Status	Married	<input type="checkbox"/>	Single <input type="checkbox"/>
15. Name and age of dependents:			
16. Postal address:			
(Please write down the postal address of your permanent residence, i.e. State or province, town, street and number).			
17. Telephone number:			
18. E-mail:			

Candidate's educational background and plans

Educational Institutions attended:	
Place (country, town):	
From:	Up to:
Please select up to 3 (three) faculties/departments from the attached list of Greek Universities in which you wish to study (places are attributed from Ministry of Foreign Affairs).	
1.	
2.	
3.	
Why you have selected the above-mentioned faculties /departments ?	
What is your mother tongue?	
What other languages do you speak (excellent-good-fair)?	
Do you already hold a scholarship from any other Institution, Organization or Government? Please specify:	
Have you received a scholarship from the Greek government or any other Greek authority 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) received any Greek scholarship now or in the past? Please specify:	

(Place)

(Date)

(applicant ' s signature)

YOU ARE KINDLY REQUESTED TO KEEP A COPY