**GEBZE TECHNICAL UNIVERSITY**

**(Photograph)**

 **STUDENT APPLICATION FORM**

**ACADEMIC YEAR 20... /20... FIELD OF STUDY**:.......................................

***This application should be completed in BLACK and in CAPITAL LETTER in order to be easily copied, faxed or e-mailed. Please enclose your CV and Transcript of records and/or any other information that may enhance your application.***

**SENDING INSTITUTION**

|  |
| --- |
| Name and full address: Erasmus ID Code: Departmental Coordinator - name, telephone, fax and e-mail. .............................................................................................................................................................. .............................................................................................................................................................. Institutional coordinator - name, telephone and e-mail: *……………………………………………………………………………………………………………………..*  |

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

|  |  |
| --- | --- |
| Family name: .....................................................First name (s): ...................................................Place and Date of birth (dd/mm/yyyy): ..........................................................................Gender: …….…......... Nationality:..................Maritual Status:.................................................T.C. Identification No (Only for Turkish Citizens): …………………..................................................Current address:...................................................... ............................................................................................................................................................................................................................................................................................................................Current address is valid until: .................................Tel.: ..........................Fax: ...................................Mobile Tel.: ...........................................................E-mail: ................................................................... | Faculty or Institute:…….……………………………Department:…………….……………………………Level:  Under Graduate  Graduate  PhDSemester: ………………..………………………….Section (Class/Thesis): ………………..……………Student Number: ……………..……………………..Average Grade of Transcript:……………….……..Permanent address (if different): ............................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................Tel.:...................................................................Fax: ..........................................................................E-mail: ...................................................................... |

**CONTACT PERSON IN EMERGENCY**

|  |
| --- |
| Name: …………………………………………… Family Name: ………………………………………..…Relationship to the applicant: ………………………………………………………………………..............Telephone: ……………………………… E-mail: …………………………………………..……….Address: ……………………………………………………………………………………………………………..………………………………………………………………………………………………………………….. ……………………………………………………………………………………………………………….. |

**LANGUAGE COMPETENCE**

|  |
| --- |
| Mother language : ................... Language of instruction at home institution (if different): .............................. |
| Other languages | I am currently studying this language | I have sufficient knowledge to follow the lectures | I need to study further to be able to follow the lectures  |
|  | Yes | no | Yes | no | yes | No |
| .............................................................................. | 🞏🞏🞏 | 🞏🞏🞏 | 🞏🞏🞏 | 🞏🞏🞏 | 🞏🞏🞏 | 🞏🞏🞏 |

**WORK EXPERIENCE RELATED TO CURRENT STUDY (if relevant)**

|  |  |  |  |
| --- | --- | --- | --- |
| Type of work experience.………………………….………………………………..…………………………..……………………… | Firm/organization………………………….…………………………….…………………………….………………… | Dates……………….………………….………………….………. | Country……………………...………………………..………………………..……………………… |

**CURRENT STUDY**

|  |
| --- |
| Diploma/degree for which you are currently studying: ……………………….................................................Number of higher education study years prior to departure abroad: ............................................................... |

**OTHERS**

Have you received any rewards, degrees etc.? Please specify.

………………………………………………………………………………………………………

Do you have any special hobbies, activities etc.? Please specify.

………………………………………………………………………………………………………

|  |
| --- |
| Do you have any disability? Yes  No If Yes; Please Describe…………………………………….  |

|  |
| --- |
| **Briefly state the reasons why you wish to study abroad?**…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..…………………………………………………………………………………………………………..………………………………………………………………………………………………………….. |
| I certify that all the information provided in this form is correct and complete to the best of my knowledge. Student’s Signature: …………………………….. Date (dd/mm/yyyy) …………………….. |

**ATTACHMENTS**: Please attach the following documents to this form.

1. Transcript of records