

**EXCHANGE STUDENT APPLICATION SHEET**

**Academic Year 2019/20**

**Fall semester**

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| **Student’s data** |  |
| First name(s): |  |
| Family name: |  |
| Date of birth: |  |
| Place of birth (city and country): |  |
| Mother’s birth name (first and family too): |  |
| Citizenship: |  |
| Passport or ID number: |  |
| Permanent address: |  |
| E-mail address: |  |
| Mobile phone number: |  |
| Name of the home/sending Institution: |  |
| Erasmus code of the home/sending Institution: |  |
| Your current study status:* BA or MA
* Year (I., II., etc.)
* Specialization (field of studies)
 | --- |
| Period of stay (fall semester or full year): |  |
| Courses that you want to take (for maximum 30 ECTS credits):\*Note: please use the course offer from our webpage (http://szfe.hu/en/incoming-exchange-students/) | ------ |