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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.....

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Postgraduate

Postgraduate course in Greece (or P.H.D,) at which you have been accepted.
.....
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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