

# Application Form

## 22<sup>nd</sup> INTERNATIONAL SUMMER UNIVERSITY

21 August– 1 September, 2017

Kőszeg, Hungary

All application materials must be submitted in **English!**

Please type or print in block letters.

Please feel free to make more copies of this application form.

Please send the completed and signed application form and all supplementary documentation by e-mail to: [info@iask.hu](mailto:info@iask.hu).

Please attach a photo in .jpg or .gif format!

**First name:** .....

**Family name:** .....

**E-mail address:** .....

**Mobile phone number:** .....

**Mailing Address:** .....

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**Male**    **Female**   **Nationality:** .....

**Date of Birth:** .....   **Place of Birth:** .....

**Mother's full maiden name:** .....

**Number of identity document (passport or ID):** .....

**Emergency contact (name and phone number):** .....

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Home university: .....

Field(s) of studies: .....

Year of your studies: .....

Title of your thesis/dissertation (if decided): .....

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Proposed title of your paper/presentation related to the Summer University: .....

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Permanent address: .....

**Languages:**

Language	Level

**Participation in international programs (summer universities, conferences, workshops, etc.):**

Title of the Program(s)	Date and place

**Publications:**

Title of the Publication(s)	Date and availability
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**Additional questions:**

I need a visa:  Yes  No

I'm vegetarian:  Yes  No

**Other special nutrition, or any unusual health conditions the organisers should know about:**

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**Where did you hear about our Summer University?**

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***I declare that all the information given in this application is correct and complete. I accept the obligation I will be attendance in Kőszeg during the whole period of the Summer University.***

.....  
**Place and date**

.....  
**Signature**

**PLEASE CHECK OUR WEBSITE FOR PROGRAM UPDATES AND INFORMATION:**

[www.iask.hu](http://www.iask.hu)