

## Application to Register for Individual Courses

Surname (last name): \_\_\_\_\_  
Given (first) name: \_\_\_\_\_ Second (middle) name: \_\_\_\_\_  
Date of Birth: (day)\_\_\_\_ (month)\_\_\_\_ (year)\_\_\_\_ Place of Birth (city/country): \_\_\_\_\_  
Citizenship: \_\_\_\_\_ Sex:  Male  Female  
Passport number: \_\_\_\_\_ Date of issue: (day)\_\_\_\_ (month)\_\_\_\_ (year)\_\_\_\_  
Place of issue: \_\_\_\_\_ Issuing agency: \_\_\_\_\_

**Proposed Semester(s) of Study:** Autumn 2015  Spring 2016  Academic year 2015/2016

**Personal Details:**

**Permanent Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
E-mail: \_\_\_\_\_

**Temporary Address (if applicable) for correspondence**

Between the following dates from: ..... until: .....

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Postcode: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_

**Emergency Contact:**

**Primary Emergency Contact**

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**Secondary Emergency Contact:**

First Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Relationship: \_\_\_\_\_

**Have you ever been convicted of a criminal offence (other than a driving offence)?**

No  Yes (please specify) \_\_\_\_\_

**Study details:**

**1. English proficiency level**

**Please choose one of the following three options:**

*\*not applicable if only polish language is taken*

English is my native language  
 English is not my native language (Please fill in your score on one of the following language tests)

TOEFL: \_\_\_\_\_  
Cambridge IELTS: \_\_\_\_\_  
CAE: \_\_\_\_\_  
CPE: \_\_\_\_\_

English is not my native language, but I have completed a University-level degree taught entirely in English.

**2. Previous study:**

Degree (expected to be) obtained: (day)\_\_\_\_ (month)\_\_\_\_ (year)\_\_\_\_

Major of study/title of degree: \_\_\_\_\_

University (college): \_\_\_\_\_

Title of Senior Exercise/Thesis (if applicable): \_\_\_\_\_

Average mark (grade): \_\_\_\_\_ Grade of diploma (if applicable): \_\_\_\_\_

Honours or awards: \_\_\_\_\_

Other degrees earned: \_\_\_\_\_

*Please remember to include full educational details on your attached CV (résumé). Please use the Europass CV format.*

**Please list the titles of the courses which you would like to take at the Centre for European Studies at Jagiellonian University. (Use additional sheets if necessary)**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

**\*Please do not forget to send this application form together with your Europass CV (résumé), a copy of previous transcripts, and official documentation of language proficiency (if applicable).**

#### **PAYMENT OF FEES**

***By bank transfer to:***

*Acc. Name:* Uniwersytet Jagielloński

*Acc. No:* PL 96 1030 1944 2906 2204 9999 9999

*At:* CITI Bank Handlowy w Warszawie S.A.

*Address:* ul. Senatorska 16, Warszawa 00-923

*Swift Code:* CITIPLPX

*Title:* Individual Fees for \_\_\_\_\_ (name of student)

***Please fax or send a copy of the transfer to us.***

#### **Additional Information:**

**Please give details of how you found out about the classes for which you are applying:**

- |   |  |   |   |
|---|--|---|---|
| <input type="checkbox"/> University Website     | <input type="checkbox"/> Other Internet source         | <input type="checkbox"/> Polish Embassy   | <input type="checkbox"/> Education Fair             |
| <input type="checkbox"/> Visited the University | <input type="checkbox"/> Scholarship/Grant Institution |   |   |
| <input type="checkbox"/> Prospectus             | <input type="checkbox"/> Poster                        | <input type="checkbox"/> Colleague/friend | <input type="checkbox"/> Professor/Academic Adviser |
| <input type="checkbox"/> Advertisement          | <input type="checkbox"/> Other (please specify) _____  |   |   |

The Centre for European Studies at the Jagiellonian University does not discriminate on the basis of age, gender, sexual orientation, race, national or ethnic origin, religion or political convictions.

All information on this application and appended thereto is protected by Polish data protection laws. It will not be released to any other parties than the staff and faculty of the Jagiellonian University as appropriate to their designated duties. All materials submitted with this application may be disclosed to the applicant on demand.

All information supplied by me on this application is, to the best of my knowledge, true and complete. I understand that misrepresentation is sufficient reason for denial of admission and may be considered grounds for terminating student status if such a misrepresentation is discovered at a later date. Unsigned applications will not be considered.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Please return to:  
Centre for European Studies, Jagiellonian University, ul. Garbarska 7A, 31-131 Kraków, Poland  
Tel/Fax: +48 (12) 429-6195 [maoffice@ces.uj.edu.pl](mailto:maoffice@ces.uj.edu.pl)  
[www.ces.uj.edu.pl](http://www.ces.uj.edu.pl)

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