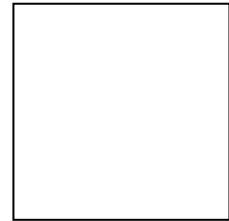




St. Cyril and St. Methodius University of Veliko Tarnovo

Please return this form to: International Relations Office
2. Teodosiy Tarnovski Str., 5003 Veliko Tarnovo, Bulgaria
tel/fax: +359-62-654984, e-mail: incoming@ts.uni-vt.bg
Deadlines: I Semester – 30 June
II Semester – 30 November



(Photograph)

ERASMUS Student Application Form

Academic year: 2019/2020

SENDING INSTITUTION

Name and full address:
.....
Teacher in charge of the exchange:
Tel. e-mail:

STUDENT'S PERSONAL DATA

Family name:	Permanent address:
First name (s):	Street:
Date of birth:	Postal code:
Place of birth:	City:
Sex:	Current address (if different):
Nationality:	/Valid until/:
	Street, number:
Tel:	Postal code:
E-mail:	City:

STUDIES

Subject:
Diploma/Degree for which you are currently studying:
Number of higher education study years prior to departure abroad:
Languages of instruction:

ACCOMMODATION

Do you apply for University **dormitory** (single room; no kitchen; no fridge; one bathroom for several single rooms)?

Price – **627 lv. (320 euro) + 150 lv. (77 euro)** guarantee deposit for the first semester and **766 lv. (390 euro) + 150 lv. (77 euro)** guarantee deposit for the second semester. The guarantee deposit will be refunded in the end of the semester in case that there are no damages in the room.

***For the first semester a deposit amounting to 85 euro should be paid until 15 September, and for the second semester – 85 euro until 31 January. This sum guarantees a room in the dormitory and should be transferred to the following bank account:** IBAN: BG03TTBB94001526509411; BIC: TTBBBG22; Bank: Societe Generale Експресбанк; Recipient: CCO ЕАД – Sofia – Branch Veliko Tarnovo

***In case of change in the prices you will be informed in due time.**

ARRIVAL INFORMATION

Date of arrival at Veliko Tarnovo:
Period of stay: from.....to.....

Student:

Date:

I the undersigned, Position:,
certify that the application of the student mentioned above has been approved
by the Sending Institution for the academic year 2019/2020.

Place:

Date:

Signature and stamp of the institution: