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## YOU MAY APPLY TO THIS SCHOLARSHIP PROGRAMME BY

## **EMAIL ONLY APPLICATION FORM**

## HUNGARIAN UNIVERSITY SCHOLARSHIP AND COMPLETE COSTS OF EDUCATION $(2015)^2$

Family name (as in passport):		Please affix photograph
Given name(s) (as in passport):		here
Birth name:		
Mother's birth name::		
Home country /Citizenship (if other):		
Date of birth (day/month/year):	Place count	of birth (at the time of birth, city / cry):
Gender Male Female	Marital status Sing	le Married
Passport No/ or other identity card No		
Current Residential Address Street, Nr.:		
Suburb, Town:		
Postcode, Country:		
Postal Address (if different):		
Office Tel. N°. (incl. Area Code): Mobile Tel. No. (incl. Area Code.):	1	E-mail:
Educ	CATIONAL BACKGROUND	
Higher Educational Institution/Location	Years attended (from-to)	Degree and Field of study
1.		
2.		
3.		

<sup>&</sup>lt;sup>1</sup> E1 – Animal nutrition and feed safety, Kaposvár

E2 – Plant protection, Keszthely
E3 – Rural development, Gödöllő

Travel costs to and from Hungary not included

## SCHOLARSHIP PROGRAMME - HUNGARIAN MINISTRY OF AGRICULTURE AND RURAL DEVELOPMENT

Language	excellent	good	fair	poor	Level and name of official exam	
English						
Hungarian						
OCCUPATION						
Name of Emplo	oyer, Addre	SS				
Occupation						
OTHER						
1. Fellowships previously awarded			d			
2. Have you previously studied or worked in Hungary? If so, please specify			worked			
3. Plans after the completion of studies						
3. Any other comments:						
This form must be completed in English. It will not be processed in any other language.						
Please E-MAIL the following documents in English in PDF or JPG format (NAME each file for ease of reference while processing your application):						
- this application form with selected course indicated at top (remember to add your Photo)						
<ul> <li>curriculum vitae</li> <li>a copy of high school/college diploma and transcript /report of study or copy of the diploma attachment</li> </ul>						
<ul><li>a copy of certificate of proficiency in English</li><li>copies of relevant pages of passport</li></ul>						
- one letter of recommendation (from your school, or workplace, if employed)						
<ul><li>statement of motivation</li><li>bill of health (certificate of good health)</li></ul>						
- statement of clean criminal record (good conduct) issued by local police authority.						
I hereby certify that all information given in this form is true and correct.						
Date					Applicant's signature	

Please E-MAIL this application together with your COMPLETE dossier to:

REU-Scholarship@fao.org

Applications are accepted between 05 January and 28 February 2015.