Czech-German-Polish
Scholarship Program of the Liberec Region –
Trilateral Ambassadors

APPLICATION FORM

Period of Scholarship study at TUL (semester)			
Name(s)		Nationality	
Surname(s)		Date of birth	
Email		Phone Nr.	
Home University name			
Home university responsible person (name, surname, position, e-mail)			
TUL faculty chosen for scholarship study			
Study programme chosen for scholarship study			
Current study cycle *(choose one option)*	BSP, MSP, DSP	Current year of study	

Use of Personal Data

The Student acknowledges and agrees that TUL will use personal data solely for processing the application during the selection procedure. TUL shall not disclose the student's personal data to any third party unless required by law.

Signatures:

Applicant:..... date:.....

Home university responsible person:..... date:.....

Technical University of Liberec | International Office
Studentská 1402/2, 461 17 Liberec 1, Czech Republic | www.tul.cz

Attachments: Cover letter, Transcript of records

Technical University of Liberec | International Office
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