**Annex 1**

**GIPA - Georgian Institute of Public Affairs**

**Application Form for Students**

**General Information**

|  |  |
| --- | --- |
| Name and Surname |  |
| Date and (date, month, year) and Place of Birth |  |
| Citizenship |  |
| E-mail Address |  |
| Mobile Phone Number |  |
| Gender | □ Female □ Male |
| Residence Address |  |
| City and the Postal Code, Country |  |
| Name and Surname and Telephone of the Contact Person in Case of Emergency |  |

**Home university**

|  |  |
| --- | --- |
| Home University |  |
| School in the Home University |  |
| Study Program (indicate fully) |  |
| Average Score GPA: a) Current b) Previous Level (bachelor’s level if applicable) |  |
| Ongoing Course in the Moment of Departure (indicate the respective information) | □ I Course (Master) □ II Course (Master)  □ I Course (Bachelor)  □ II Course (Bachelor)  □ III Course (Bachelor)  □ IV Course (Bachelor) |
| Address, City, Country |  |
| Telephone Number of the Person Responsible for the Exchange Program |  |
| E-mail Address of the Person Responsible for the Exchange Program |  |

**Foreign Languages**

|  |  |  |  |
| --- | --- | --- | --- |
|  | | | |
| Please indicate the level of knowledge of foreign language: | | | |
| 1. Language: Foreign Language 1 | Lower than Average  A1 □ A2 □ | Average  B1 □ B2 □ | High  C1 □ C2 □ |
| 1. Language: Foreign Language 2 | Lower than Average  A1 □ A2 □ | Average  B1 □ B2 □ | High  C1 □ C2 □ |
| 1. Language: Foreign Language 3 | Lower than Average  A1 □ A2 □ | Average  B1 □ B2 □ | High  C1 □ C2 □ |

**Host university**

|  |  |
| --- | --- |
| Name of Host University |  |
| Main Study Direction in the Host university |  |
| Name of the Study Program/ Programs |  |
| Study Level within the Scope of the Exchange University | □ Bachelor  □ Master  □ Doctoral |
| Study Period According to the Calendar of the Host university | □ I Semester (Autumn)  □ II Semester (Spring)  □ Full Academic Year  □ Other (please indicate) |
| Address, City, Country |  |
| Telephone Number of the Person Responsible for Exchange Program |  |
| E-mail Address of the Person Responsible for Exchange Program |  |

**Courses Considered by the Exchange Program**

|  |  |  |  |
| --- | --- | --- | --- |
| Course Code (if applicable) | Name of the Course (as it is indicated in the course catalogue of the host university) | Semester (Autumn/ Spring) | Number of credits to be awarded by the Host university (ECTS) |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Number of Credits** | | |  |

**Date:**

**Applicant’s Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_