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 □
2. Language: Foreign Language 2	Lower than Average A1 □ A2 □	Average B1 □ B2 □	High C1 □ C2 □
3. 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	Semester (Autumn/ Spring)	Number of credits to be awarded by the Host university (ECTS)

	catalogue of the host university)		
Total Number of Credits			

Date:

Applicant's Signature: _____