



**ALPS ADRIATIC SCHOLARSHIP  
UNIVERSITY OF PÉCS – CITY OF PÉCS**

***APPLICATION FORM***

**PÉCS DEBATE ACADEMY 2017**  
'University Education and Student Life in the 21<sup>st</sup> Century'

28 July – 6 August 2017, Pécs

First name:	
Last Name:	

**CONTACT DETAILS:**

Address:	
ZIP Code:	
City:	
Country:	
Mobile phone:	
Home phone:	
E-mail:	

**PERSONAL DATA:**

Date of Birth:	
Gender:	
Nationality:	
Passport number:	
Language(s) spoken:	

**INFORMATION ON STUDIES:**

Home university:	
Major/main field of study:	
Current year of study:	
Expected year of graduation:	
Degree:	



**EMERGENCY CONTACT INFORMATION**

First name:	
Last name:	
Home phone:	
Mobile phone:	
Work phone:	
Email:	
Relation to you:	

**ACCOMMODATION**

	Yes	No
I apply for dormitory placement		

**SPECIAL NEEDS**

Please outline any special needs, support that you may require

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Please state where you first heard about the Pécs Debate Academy:

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Please explain your motivations for applying to the Pécs Debate Academy:

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Have you participated in the Pécs Debate Academy or (in ICWiP) before?

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Do you allow SIEN Foundation to share your basic contact information (name, date of birth, country, city, e-mail address) with the University of Pécs and SORCE Network members so that you could learn about other youth activities and festivals, summer schools?

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I understand that I will be speaking English every day during the summer school and will participate in all the activities to the best of my ability.

- Understood and accepted.

The closing event of the Pécs Debate Academy is the Final Debate Tournament. I agree to participate in it.

- I will participate in the Tournament.
- I will not participate in the Tournament

I certify that the information I have provided is true and correct and understand that the university has the right to withdraw any offer made or cancel any registration if any of these statements prove to be incorrect. I accept full responsibility for the information provided on this form. If I am accepted on the summer program I agree that I will comply with all the governing conditions.

Date: .....

Signature: .....

**Please complete and sign this form, then email it directly to the University of Pécs at:**

Dr. Gyöngyi Pozsgai,

International Relations Co-ordinator

Centre for International Relations

[summerschoolpecs@pte.hu](mailto:summerschoolpecs@pte.hu)

**Deadline of application: 5 May 2017**