**Full Name:**  **DECLARATION FORM**

 **ACADEMIC YEAR 2022-23**

PUT YOUR PHOTO HERE

**INTERNATIONAL OFFICE OF THE FACULTY OF SCIENCES (TTK)**

 **OF THE UNIVERSITY OF PÉCS**



**PROGRAMME DETAILS** at the

Exchange Program: Erasmus+

Period of stay:

**PERSONAL DETAILS**

Given name: Gender:

Surname: Place of birth:

Citizenship: Identity document:

Date of birth: Document number:

Email: Document validity:

Phone number:

Permanent Address

Correspondence address:

**SENDING INSTITUTION**

Home university:

Level of study: Current year of study:

Field of study:

Language skills:

**Student’s signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Institutional coordinator**

Name and family name:

Telephone:

Email:

I declare that this student has been selected by this institution for exchange programme at the \_\_\_\_\_\_\_\_\_\_\_\_ and that the information provided on this form is correct.

**Home University’s Exchange Coordinator signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date: Stamp:**