6. sz. melléklet

Testnevelési Egyetem

Intézményi azonosító: FI 89399

Registration form

Personal data of the student

|  |  |  |
| --- | --- | --- |
| Stipendium Hungaricum Scholarship: [ ]  |  |  |

|  |  |
| --- | --- |
| Name:       |        |
| Citizenship:       | Mother’s name: i       |
| Date of birth:       | Place of birth:       |
| Program number:  | Supervisor:       |

## Adatlap:

|  |
| --- |
| Address:       |
| Email address:  | Mobil:       |
| Workplace:       | Tel/fax:       |
| Address:       |
| Diploma:       | Number and date of the diploma:       |
| Name of University:       |

Date: Budapest, .....................................

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 PhD Student’s Signature