Student Exchange Program Application Form Batumi Shota Rustaveli

State University

(2023-2024)

Batumi Shota Rustaveli State University

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**Department of Strategic Development and International Relations**

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| --- |
| Home Institute: |
| Last Name  First NameFull Name\*: Mr. / Ms. *\*Please type your name and surname as it appears in your passport.* |  YY / MM / DDDate of Birth |
| Faculty:  | Field of Study: |
| Country of Citizenship: |
| Address: | E-mail: |
| Phone: |
| Program applied for: Exchange Program Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| Proposed Study Period: 1. \_\_\_\_\_-\_\_\_\_\_ Academic Year
2. \_\_\_\_\_\_ - Semester
 | Level: Undergraduate Master’s Ph.D. |

A. Language Proficiency

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Language | Beginner | Intermediate | Advanced | Fluent |
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B. Skills and Hobbies

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C. Contact Person at Home University:

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| Full Name: |
| Position: |
| Contact details | E-mail: |
| Phone: |

**Checklist of Required Application Documents:**

 Application Form

 A Certificate of Enrollment from home university

 University Transcript of Records

 A Copy of student’s passport

I hereby declare that the information provided is true and correct.

Date:

Student’s Name:

Signature: