

SCHOLARSHIP APPLICATION FORM

Please type or complete in block letters and submit in duplicate.

Academic year		202 – 202				
Length of visit (in months)						Photo (optional)
Period		from to				
APPLICANT DATA						
Family name			First name(s)			
Academic Degree(s) and Rank(s)						
Gender			Date of birth (do	d/mm/yyyy)		
Citizenship			International pa card No., as app (not required of EU/EEA countri	olicable f citizens of		
E-mail			Telephone (in international format)			
Permanent residence address		Street, number		City, zip code		Country
Complete mailing address (if different from above)		Street, number, etc.		City, zip code		Country
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CURRENT EM	IPLOYMENT					
Name and add	ress of employer					
Present occupation						
EDUCATIONA	L BACKGROUND					
Highest academic degree awarded						
Field / specialiation						
LANGUAGE	PROFICIENCY					
Languages	Skills – please indicate speaker level).	the appro	opriate level usin	g a scale ranging from 1 (beginner) to 6 (near native	
	Listening	Reading		Speaking	Writing	
Czech						
English						
French						
German						
PLANNED RE	ESEARCH IN THE CZECH I	REPUBLI	С			
Name of the host institution, faculty						
Field of resea	rch					
Working language		□Czech □English □German □French				
Have you obtained a letter of invitation [□YES (please attach a copy) □NO				
The main objective of your research stay in the Czech Republic						
Have you been a scholarship-holder in the Czech Republic during the past three years? If so, please specify.						
Do you wish to be accommodated at a student dormitory?		□YES □NO				

I ATTACH THE FOLLOWING DOCUMENTS:								
□Academic CV	□Passport/ ID copy							
Detailed plan of research	☐Letter of invitation							
List of publications								
All documents must be submitted in duplicate and written in or translated into Czech or English.								
Nota bene:								
 Incomplete scholarship application dossiers and/or inadequately completed scholarship application forms will not be processed. 								
 The Ministry of Education, Youth and Sports (MEYS) reserves the right to change the requested term of scholarship and/or place any applicant to a course and/or higher education institution different from those indicated in his/her scholarship application form, if the admission as required by the applicant is not possible. 								
I have been informed of the terms of the scholarship.								
I hereby certify that the information given in this application is true	and complete to the best of my knowledge.							
By filing this application for the MEYS scholarship, I hereby acknowledge that my personal data provided in the application form and attachments thereto submitted for the purpose of selection proceedings as well as for the purpose of my possible later nomination will be processed by the respective diplomatic mission of the Czech Republic, by the Ministry of Education, Youth and Sports of the Czech Republic, by the Czech National Agency for Education and Research and by the appropriate host university or universities in the Czech Republic, to the extent that is necessary to address my application, in compliance with the Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation). I also hereby acknowledge the fact that my aforementioned personal data will be forwarded to other state authorities in the Czech Republic provided that it is necessary for the processing of my scholarship application, and information on the outcome of my application will be conveyed to the respective nominating agency, i.e. to the appropriate diplomatic mission of the Czech Republic or the respective authority of the foreign state concerned. I also acknowledge that my personal data will be stored in analogue documents as well as in digital form by the Ministry of Education, Youth and Sports of the Czech Republic and by the Czech National Agency for International Education and Research for the period of 10 years in their archives, in compliance with their respective File Retention and File Destruction Rules.								

Date.....

Handwritten signature.....

Place