

APPLICATION FORM FOR TEACHER/RESEARCHER

General informatio	n				
Surname					
Name/s					
Gender	☐ Male ☐	Female			
Date of Birth				(day/	month/year)
Country of Birth					
City of Birth					
Citizenship					
Passport No					
Date of Issue					
Date of Expiry					
Phone №					
E-mail					
Special needs	☐ Yes			🗆 N	0
		(Please,	. specify)		
Educational field					
Home university					
Department of afference					
Teaching					
Proficiency of language					
English Other EU languag	□Excelle ge/s	ent 	Good	□Poor	□None
Do you need an invitation letter? ☐ Yes ☐ No					



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PRIVACY

☐ The undersigned authorizes the processing of p	ersonal data in accordance
with Article 13 GDPR (EU Regulation 2016/679)	

ANNEXES

Copy of passport/ID card

Curriculum vitae