

Course to which you are applying<sup>1</sup> **E1**  **E2**

YOU MAY APPLY TO THIS SCHOLARSHIP PROGRAMME BY

**EMAIL ONLY**

**APPLICATION FORM**

**HUNGARIAN UNIVERSITY SCHOLARSHIP AND COMPLETE COSTS OF EDUCATION (2023)<sup>1</sup>**

<b>Family name (as in passport):</b>				<b>Please affix photograph here</b>
<b>Given name(s) (as in passport):</b>				
<b>Birth name:</b>				
<b>Mother's birth name::</b>				
<b>Home country /Citizenship (if other):</b>				
<b>Date of birth (day/month/year):</b>		<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<b>Place of birth (at the time of birth, city / country):</b>	
<b>Gender</b>	<b>Male</b>	<b>Female</b>	<b>Marital status</b>	<b>Single</b>
	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
<i>Passport No/ or other identity card No</i>				
<b>Current Residential Address</b>				
<b>Street, Nr.:</b>				
<b>Suburb, Town:</b>				
<b>Postcode, Country:</b>				
<b>Postal Address (if different):</b>				
<b>Office Tel. N°. (incl. Area Code):</b>				<b>E-mail:</b>
<b>Mobile Tel. No. (incl. Area Code.):</b>				

**EDUCATIONAL BACKGROUND**

<b>Higher Educational Institution/Location</b>	<b>Years attended (from-to)</b>	<b>Degree and Field of study</b>
1.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
2.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
3.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

<sup>1</sup> E1 – Master in Agricultural Water Management Engineering

E2 - Master in Biotechnology

<sup>2</sup> Travel costs to and from Hungary not included

**SCHOLARSHIP PROGRAMME - HUNGARIAN MINISTRY OF AGRICULTURE**

Language	excellent	good	fair	poor	Level and name of official exam
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**OCCUPATION**

Name of Employer, Address	
Occupation	

**OTHER**

1. Fellowships previously awarded	
2. Have you previously studied or worked in Hungary? If so, please specify	
3. Plans after the completion of studies	
3. Any other comments:	

**This form must be completed in English. It will not be processed in any other language.**

**Please E-MAIL the following documents in English in PDF or JPG format, NAMED according to their contents (without names of files application will not be processed)**

- this application form with selected course indicated at top (remember to add your Photo)
- curriculum vitae
- a copy of high school/college diploma and transcript /report of study or copy of the diploma attachment
- a copy of certificate of proficiency in English
- copies of relevant pages of passport
- one letter of recommendation (from your school, or workplace, if employed)
- statement of motivation
- Health Certificate issued by Medical Doctor
- Certificate of Good Conduct issued by local police authority.

**I hereby certify that all information given in this form is true and correct.**

<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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Date

.....

Applicant's signature

Please EMAIL this application together with your COMPLETE dossier to:

[REU-Scholarship@fao.org](mailto:REU-Scholarship@fao.org)

**Applications are accepted between 15 January and 28 February 2023.**

Students must submit only COMPLETED dossiers. **Incomplete dossiers will not be considered.**