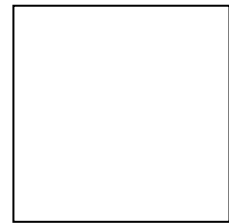




# St. Cyril and St. Methodius University of Veliko Tarnovo

Please return this form to: International Relations Office  
2. Teodosiy Tarnovski Str., 5003 Veliko Tarnovo, Bulgaria  
tel/fax: +359-62-654984, e-mail: [incoming@ts.uni-vt.bg](mailto:incoming@ts.uni-vt.bg)  
Deadlines: I Semester – 30 July  
II Semester – 30 November



(Photograph)

## **ERASMUS Student Application Form**

Academic year: 2020/2021

### **SENDING INSTITUTION**

Name and full address: .....  
.....  
Teacher in charge of the exchange: .....  
Tel. .... e-mail: .....

### **STUDENT'S PERSONAL DATA**

Family name: .....	Permanent address:
First name (s): .....	Street: .....
Date of birth: .....	Postal code: .....
Place of birth: .....	City: .....
Sex: .....	Current address (if different):
Nationality: .....	/Valid until/: .....
Tel: .....	Street, number: .....
E-mail: .....	Postal code: .....
	City: .....

### **STUDIES**

Subject: .....  
Degree for which you are currently studying: .....  
Number of higher education study years prior to departure abroad: .....  
Languages of instruction: .....

### **ACCOMMODATION**

Do you apply for University **dormitory** (single room; no kitchen; no fridge; one bathroom for several single rooms)? .....  
Prices: **First semester – 777 lv./398 euro (150 lv. /77 euro** guarantee deposit included in the price); **second semester – 916 lv./469 euro (150 lv. /77 euro** guarantee deposit included in the price). The guarantee deposit will be refunded in the end of the semester in case that there are no damages in the room.  
**\*For the first semester a deposit amounting to 85 euro should be paid until 15 September, and for the second semester – 85 euro until 31 January. This sum guarantees a room in the dormitory and should be transferred to the following bank account: IBAN: BG62STSA93001526509411; BIC: STSABGSF; Bank: DSK Bank Veliko Tarnovo; Recipient: CCO ЕАД – Branch Veliko Tarnovo**  
**\*In case of change in the prices you will be informed in due time.**

### **ARRIVAL INFORMATION**

Date of arrival at Veliko Tarnovo: .....  
Period of stay: from.....to.....

Student: ..... Date: .....

I the undersigned ....., Position:....., certify that the application of the student mentioned above has been approved by the sending institution for the academic year 2020/2021.

Place: .....

Date: .....

Signature and stamp of the institution:.....