

# HELLENIC REPUBLIC MINISTRY OF EDUCATION & RELIGIOUS AFFAIRS, CULTURE AND SPORT

### STATE SCHOLARSHIPS FOUNDATION

(I.K.Y.)

DIRECTORATE FOR SPECIAL PROGRAMMES,
INTERNATIONAL SCHOLARSHIPS
UNIT FOR FOREIGNERS
AND CULTURAL EXCHANGES

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Photograph

#### APPLICATION FOR A SCHOLARSHIP

## STUDY OF THE GREEK LANGUAGE AND CULTURE IN GREECE (22<sup>st</sup> PROGRAMME, ACADEMIC YEAR 2013 - 2014)

YOU ARE KINDLY REQUESTED TO CONSULT THE RELEVANT ANNOUNCEMENT 2013-2014 (www.iky.gr) PRIOR TO YOUR COMPLETING THIS APPLICATION FORM WHICH IS TO BE SUBMITTED TOGETHER WITH THE SUPPPORTING DOCUMENTATION TO THE GREEK DIPLOMATIC AUTHORITIES (EMBASSY OR CONSULATE) IN YOUR HOME COUNTRY.

Please use the Latin alphabet and complete in BLOCK CAPITALS (in Greek, English or French) using ink or typescript. Only complete documentation will be processed. If you need more space for your reply, please continue on a separate sheet and attach it to this form.

#### **PERSONAL DETAILS:**

1.	Family name:
2.	First name(s) (in full):
3.	Date of birth:
5.	Nationality:(I hereby declare that I do not have foreign and Greek Nationality)
	Non-Greek National of Greek origin Yes No
6.	Degrees obtained (graduate/postgraduate) – Higher Education Institutions attended:
7.	Class of degrees (Honours, Pass, etc.) (If any):
8.	Date(s) of award:

9.	Mother tongue:
10.	Competency in Modern Greek Language:
11.	Other language(s) – qualifications / level (excellent-good-fair):
12.	Are you employed: Yes No No
13.	Current employment / position:
14.	Previous employment / experience:
15.	Do you currently live in Greece or have you already lived in Greece in the past? Please state the
	period spent in Greece and for what purpose:
16.	Please list any scholarships supported by the I.K.Y. for studies in Greece or other awarding
	authority (Greek or foreign) you have applied for (indicate the name of the institution, the
	programme and the duration of the scholarship) (if applicable):
17.	Please provide information on any awards or prizes received:

18.	Describe any potential benefits to your country of origin or your career that will result from the
	scholarship:
19.	Please state the reasons for which you declare your participation in this specific programme
	related with your information about Greece:
20.	Please state any serious medical problem or illness you are suffering from and enclose any
	relevant medical certificate (translated in English, French or Greek language and certified
	accordingly - where applicable):
21.	a. Passport/identity card number:
	b. Date of issue: c. Issuing Authority:
22.	Father's name:
23.	Marital status:
24.	Sex: male female
25.	Permanent home address:

26.	Postal address (if different from the above mentioned during submission and selection period			
.5	state of province, city, street and number, postal code):			
27.	Telephone (landline): b. mobile phone			
	c. E-mail			
Check list:				
1.	A recent photograph			
2.	An up-to-date curriculum vitae 🗌			
3.	A health certificate by a state hospital or from the relevant health service certifying that I do not			
	suffer from any infectious diseases or disabilities that can endanger public health or security (in			
	accordance with the Regulations of the World Health Organisation)			
4.	Certified* copies of University Degree(s) – Diploma(s)			
5.	Official certificates indicating the proficiency in Greek or English or French			
6.	A written evidence of previous or current employment as a teacher of Greek (if applicable)			
7.	Two (2) reference letters			
8.	A copy of your passport/identity card (where applicable)			
	Signature of applicant Date			

\*Note: All the above-mentioned documents must be written or translated into Greek or English or French. In addition, documents numbered 3, 4, 5 and 8 must be certified by the Greek Diplomatic Authorities (Embassy or Consulate) only in cases where the candidate's state of origin is not a member of the Hague Convention (Apostille) of 5 October 1961 abolishing the requirement of legalisation for foreign public documents.