

 **STUDENT NOMINATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | **Reference number** |  |  |
| **PERSONAL INFORMATION** |  |  |  |
|  |  |  |
|  |  |  |  |  |
| **Family name(s)** |   | Date of birth |  |  |
| **First and/or other names** |  | Place of birth |  |  |
|  |  |  |
| **Home address** |  | Gender |  |  |
|  |  |  |
|  |  | Nationality |  |  |
|  |  |  |  |
|  |  |  |  |
| **Address during terms** |  | ID number |  |  |
|  |  |  |
|  |  | Place of issue |  |  |
|  |  |  |  |
|  |  | Valid until |  |  |
|  |  |  |  |
| **Phone number** |  |  |  |  |
|  |  |  |  |
| **Alternative phone number** |  |  |  |  |
|  |  |  |  |
| **Email** |  |  |  |  |
|  |  |  |  |
|  |  |  |  |  |
| **STUDY INFORMATION** |  |  |  |
|  |  |  |  |  |
| **Field of study** |  | Languages |  |  |
| **Specialization** |  |  |  |  |
|  |  |  |  |
| **Completed years of study** |  | Total years required |  |  |
|  |  |  |
|  |  |  |  |  |
| **WORKING RELATED INFORMATION** |  |  |  |
|  |  |  |  |  |
| Desired period of training |  |  |  |  |
|  |  |  |  |  |

**Disclaimer**

* I agree that the personal data, which has been provided to IAESTE, may be passed to IAESTE member countries (full members, associate members and cooperating institutions) and potential employers for the purpose of arranging my traineeship. *Also my personal data may be provided to government authorities for the issuance of visa/work permit purposes.*
* **I am aware that I am not allowed to contact the company or the Receiving Country before being accepted.** You are accepted for this training offer only after the receipt of the IAESTE acceptance form.
* I confirm that all the data I provide is correct and truthful.

|  |  |  |
| --- | --- | --- |
| Date |  | Student's signature |
|  |  |  |

**FOR INTERNAL USE**

|  |  |  |
| --- | --- | --- |
| Date |  | On behalf of sending country |
|  |  |  |