**Application form for exchange student program**

**Fehér Miklós Gymnasium**

**Personal data of the applicant:**

Name (according to passport or ID): …………………………………………………………..

Date and place of birth: ………………………………………………………………………...

Mother’s birth name: …………………………………………………………………………..

Nationality: …………………………………………………………………………………….

Passport number: ………………………………………………………………………………

Address: ………………………………………………………………………………………..

Email: ………………………………………………………………………………………….

**Other details:**

At least intermediate level language: ………………………………………………………….

Current educational institution: ………………………………………………………………..

Class, educational level: ……………………………………………………………………….

Is the applicant allergic to something? No Yes, to: ………………………………......

Does the applicant have any infectious disease? No Yes: ……………………………………...

Is the applicant vegetarian? Yes No

……………..……………………… ……………..………………………

Applicant’s signature Legal representatives’ signature

………………………………………..

Place, date