🡪Please fill this form out with the computer

🡪 Print it and sign it by hand

🡪 Please submit all application documents in ONE email with subject “Application for Water BIP 2022” to Christine.kolland@unileoben.ac.at

|  |  |  |
| --- | --- | --- |
| **First name**:  **Last name**: | **Academic title**: | |
| **Birth date**:       (DD/MM/YYYY) |  | |
| **Passport number**:  **Nationality:**  **Mother tongue**: | **Passport expiration date:**        (DD/MM/YYYY) | |
| **Telephone number:** | **Email-address** | |
| **Home address:**  **Street**: | **Zip-code**:  **City**: | |
| **Emergency contact**  **First and last name:**  **Address**: | **Emergency contact**  **Telephone number**:  **Email address**: | |
| **Home university’s name:**  **Home university’s address**:  **Field of study:**  **Institute/ Department:** | |  |
| **Graduation date of the secondary**  **school leaving examination**:  **Name of the secondary school**: | |  |
| **Level of study:**  BSc MSc PhD  **Completed ECTS in current study program:** | |  |
| **English level:**  A1 A2 B1 B2 C1 C2 | |  |

Confirmation of Application and Regulations

I apply for the blended intensive programme (BIP) *Water: Tool and Resource* in the period of July-October 2022. This application is binding.

I confirm that all data stated herein are correct and allow Montanuniversität Leoben to process, save and use the data for internal purposes and share it with my home university.

I confirm to autonomously take on an adequate insurance for the time at Montanuniversität Leoben (travel, health care, accident, liability, repatriation). Montanuniversität Leoben shall not be liable for any losses and/or damages caused intentionally or unintentionally by the participants of the BIP.

I acknowledge that Montanuniversität Leoben does not cover any travel costs to and from the venue: BIP participants must arrive and depart autonomously and carry their own travel costs to arrive and depart from the venue.

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Date Signature (print and sign by hand!)