**APPLICATION FORM**

1. Name of the applicant:
2. Neptun code:
3. Place and date of birth:
4. Mother's name:
5. Training program/specialization:
6. Academic average of the previous semester:
7. Phone number:
8. Permanent address:
9. Address for notifications:
10. E-mail:
11. Name of the department applied for:

1. Type of membership (community membership, scientific membership):

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 By signing this form, I agree that the decision of the Commission will be made public by the "Terplán Zénó" Szakkollégium. I further acknowledge that the condition for academic membership is the documented completion of the activities specified by the mentor appointed by the head of the department (the application is valid with the electronic submission of the signed application form and the student data sheet).

Miskolc,

signature

……………………………………

signature of the head of department