**FACULTY OF POLITICAL SCIENCE, UNIVERSITY OF ZAGREB**

**APPLICATION FORM**

For the enrollment in the 1st year of the Master of European Studies for academic year 2017/2018

**GENERAL INFORMATION ON CANDIDATE**

|  |  |
| --- | --- |
| **Name** | **Surname** |
| **JMBAG** | **OIB** |
| **Gender m / f** | **Citizenship** |

**PERMANENT RESIDENCE**

|  |  |
| --- | --- |
| **City** |  |
| **Street** | **E-mail** |
| **State** | **Mobile number** |

**FINISHED UNDERGRADUATE STUDY**

|  |  |
| --- | --- |
| **University, Study programme, place** | **Average grade (three decimals)**  |

**FINISHED OR ENROLLED AT OTHER MASTER STUDY? YES N0 (if YES, where and when?)**

**I attach following documents to the application:**

* Cover letter in English
* CV in English
* 2 academic letters of recommendation
* Certified copy of a diploma (Validated by the University of Zagreb).  We accept applications with confirmation issued by the Ured za akademsko priznavanje inozemskih visokoškolskih kvalifikacija Sveučilišta u Zagrebu (Office for academic recognition of foreign higher education qualifications of the University of Zagreb), that the request for the recognition of diploma was submitted by the student.
* Grade transcript
* Contact address and phone number

**By my signature, I certify that all of the information provided in the application, including the OIB, can only be used and published for the purposes of application.**

 **Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**