



Europa-Universität Viadrina, PF 1786, 15207 Frankfurt (Oder)

(to be filled in by the university)

Bewerbernummer: \_\_\_\_\_

Matrikelnummer: \_\_\_\_\_

## Application for Visiting Students

Study period: \_\_\_\_\_

Field of Studies: \_\_\_\_\_

### Personal Details

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

### Address

Street: \_\_\_\_\_

Zip code: \_\_\_\_\_ City: \_\_\_\_\_

Country: \_\_\_\_\_

Email: \_\_\_\_\_

### School leaving certificate

Year: \_\_\_\_\_ Country: \_\_\_\_\_

Home University: \_\_\_\_\_

Language ability German: \_\_\_\_\_

Language ability English: \_\_\_\_\_

Place, Date

Signature

### Confirmation of home university

We confirm that Mr./Ms.  
is enrolled as a student in our university right now and as well during his/her stay to the  
European University Viadrina.

University:

Name:

Function:

Place, Date

Signature, Stamp