



HELLENIC REPUBLIC  
MINISTRY OF EDUCATION  
AND RELIGIOUS AFFAIRS

STATE SCHOLARSHIPS FOUNDATION  
(I.K.Y.)  
DIRECTORATE FOR SPECIAL PROGRAMMES,  
INTERNATIONAL SCHOLARSHIPS  
UNIT FOR FOREIGNERS  
AND CULTURAL EXCHANGES

Address: 41, Ethnikis Antistasseos Avenue,  
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Fax: +30 210 3312759, 210 3221863  
E-mail: foreigners@iky.gr  
Website: <https://www.iky.gr>

Please  
attach/insert  
a recent  
photograph  
here

APPLICATION FOR A SCHOLARSHIP  
STUDY OF THE GREEK LANGUAGE AND CULTURE IN GREECE  
(26<sup>th</sup> PROGRAMME, ACADEMIC YEAR 2019-2020)

*You are kindly requested to read the applicable announcement 2019-2020 ([www.iky.gr](http://www.iky.gr)) prior to your completing this application form.*

*Please note that you have to send this completed application form and documentation along with your curriculum vitae via our email: [foreigners@iky.gr](mailto:foreigners@iky.gr) by 14/11/2019.*

*The selected candidates are required to submit in hard copy, all documentation to I.K.Y. within the first 10 days of December 2019.*

*Please use the Latin alphabet and complete in BLOCK CAPITALS (in Greek or English).*

**PERSONAL DETAILS**

1. Family name: ..... Father's name: .....
2. First name(s) (in full): .....  
(Please write your names exactly as they appear on your passport / identity card)
3. Date of birth: ..... 4. Place of birth: .....
5. a. Nationality: ..... b. Ethnic origin: .....
- ☐ male ☐ female

*I hereby declare that I do not have foreign and Greek (dual) Nationality*

Are you a non-Greek National of Greek ethnic origin?

Yes ☐

No ☐

6. Postal address (state of province, city, street and number, postal code): .....

7. Tel.Number (+landline)/ Mob.phone : ..... 8. E-mail: .....

9. Passport No / or national identity card /date of issue : .....

## EDUCATION

10. Degrees obtained (graduate/postgraduate) – Higher Education Institutions attended (*please state the city and country*):

a. ....

b. ....

## LANGUAGES

11. Mother tongue: .....

12. Competency in Modern Greek language: ☐A1 ☐A2 ☐B1 ☐B2 ☐Γ

13. Other language(s) – qualifications / level (*excellent-good-fair*): .....

## ADDITIONAL INFORMATION

14. Please list any scholarships supported by the I.K.Y. or other Greek awarding authority (indicating the name of the awarding authority-institution, the type, the duration, the academic year of the scholarship).

15. Current employment / position: .....

16. Do you currently live in Greece or have you already lived in Greece in the past? .....

17. Emergency Contact Information (*Name/Telephone/E-mail*): .....

.....

## Check list:

1. An up-to-date curriculum vitae ☐
  2. Certified\* copies of my University Degree(s) – Diploma(s) ☐
  3. A recent health certificate by a state hospital or by the relevant recognized health authority indicating that: *"I do not suffer from any infectious diseases or disabilities that can endanger public health or security"* (in accordance with the Regulations of the World Health Organisation) ☐
  4. Reference letter of one (1) academic ☐
  5. A certified copy of my passport / or national identity card ☐
- Official certificates indicating the knowledge of Greek language (if any)* ☐

***\*Note:** If documentation is not in Greek, English or French, a certified translation (by the Greek Diplomatic Authorities) must be supplied. In addition, documents numbered 2, 3, should bear the Apostille or be certified by the Greek Diplomatic Authorities (Embassy or Consulate) in cases where the candidate's state of origin is not a member of the Hague Convention (Apostille) of 5 October 1961 abolishing the requirement of legalisation for foreign public documents.*

#### **DECLARATION BY THE APPLICANT**

**I, the undersigned, .....**

herewith apply for a scholarship to attend courses and seminars in the Modern Greek Language and Culture at a Greek State University and hereby declare that all information in this application and in supporting documentation is true and accurate, to the best of my knowledge, and comply with the terms of the applicable Call for Applicants (26<sup>th</sup> Programme of Modern Greek Language and Culture, academic year 2019-2020). I understand that submission of false or misleading information may be sufficient cause for refusal, withdrawal or termination of my scholarship.

.....  
*Signature of applicant*

.....  
*Date*