#### Miroslav Vlček's Scholarship for Contribution to the Internationalization of UCT Prague

#### Personal data of the Applicant

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Family name |  | | Date of birth |  |
| First name |  | | Citizenship |  |
| Permanent address (address in home country): | | | | |
| Address in the Czech Republic: | | | | |
| Phone: | | University e-mail: | | |
| Czech bank account number: | | | | |

#### Status

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| The applicant is a current student of UCT Prague | | | Yes | No | |
|  | Faculty: | Study level | | | Study year |
| The applicant is studying | FCHT  FPBT  FTOP  FCHI  ÚEM | Bachelor  Master  PhD | | | 1  2  3  4 |

|  |  |  |
| --- | --- | --- |
| Is the applicant currently receiving a financial aid from UCT Prague? | Yes | No |
| Has the applicant received the Miroslav Vlček scholarship for contribution to the internationalization of UCT Prague before? | Yes | No |
| Description of the extraordinary contribution of the applicant to the strengthening  of the international reputation of the institution and study environment of UCT Prague  (e.g. exceptional extracurricular activities in the form of project involvement; research; spreading the good name of UCT Prague and Czech higher education in the world). | | |

#### Signatures

Signature of a lecturer or a supervisor of UCT Prague confirming achievements of applicant's extraordinary contribution to the strengthening of the international reputation of the institution and study environment of UCT Prague described in this application:

Title, name and surname of the lecturer/supervisor:

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Email address of the lecturer/supervisor:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of the lecturer/supervisor**

|  |  |
| --- | --- |
| Date: | Signature of the lecurer/supervisor: |

**Applicant’s statement**: *Hereby I declare that all the above information is correct and true.*

|  |  |
| --- | --- |
| Date: | Signature of the applicant: |

#### Note

The file must be fully completed in order to be reviewed by Scholarship Committee. Incomplete or incorrectly filled forms will be excluded from the selection process.

The deadline for submitting the scholarship application is on 11. 11. of the respective academic year.   
All applicants will be notified of their award by November 30 of the respective academic year.

The scholarship application shall be submitted to the following address:

[Microsoft Forms](https://forms.office.com/e/UCNsEqefVb)