|  |  |
| --- | --- |
|  | **RIGA MEDICAL COLLEGE****OF THE UNIVERSITY OF LATVIA**1 Hipokrata Str., Riga, LV-1079, Latvia Phone +371 67840744 Fax +371 67547797 E-mail: koledza@rmkoledza.lv |

**STUDENT APPLICATION FORM**

**ACADEMIC YEAR: 2017 /2018**

**STUDY PROGRAMME:**

**STUDY YEAR:**

**HOME UNIVERSITY**

|  |
| --- |
| Name and full address: Tbilisi State Medical University  Department coordinator (name, telephone, e-mail): Meda Jgharkava  Institutional coordinator (name, telephone, e-mail): Nino Kandelaki |

**STUDENT’S PERSONAL DATA**

|  |  |
| --- | --- |
| First name(s):  Family name(s):  Date of birth:  Gender: | Nationality:  Address:  Tel.:  E-mail: |

**LANGUAGE COMPETENCES**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Mother tongue: Georgian: | | | | | | |
| Other languages | **A1** | **A2** | **B1** | **B2** | **C1** | **C2** |
| 1.English | □  □  □ | □  □  □ | X  X  □ | □  □  □ | □  □  □ | □  □  □ |
| 2.Russian |
| 3. |

**MOBILITY PERIOD**

|  |  |
| --- | --- |
| **From:** | **To:** |
| **……./February/2018**  date/month/year | **..…../April/2018**  date/month/year |

**Please attach Transcript of records and Learning Agreement**

|  |  |
| --- | --- |
| **SENDING INSTITUTION** | |
| We hereby acknowledge the nomination of the mobility applicant. | |
| Student’s signature  ..............................................................................  Date: .................................................................... | Coordinator’s signature  Medea Jgharkava  Date : ............................................................................ |

|  |  |
| --- | --- |
| **RECEIVING INSTITUTION** | |
| We hereby acknowledge receipt of the application, the proposed learning agreement and the candidate’s Transcript of records. | |
| Departmental coordinator’s signature  Linda Alondere  Date: .................................................................... | Institutional coordinator’s signature  Astra Bukulite  Date : ............................................................................ |