



HELLENIC REPUBLIC  
 MINISTRY FOR EDUCATION,  
 RESEARCH & RELIGIOUS AFFAIRS

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**STATE SCHOLARSHIPS FOUNDATION  
 (I.K.Y.)**

DIRECTORATE FOR SPECIAL PROGRAMMES,  
 INTERNATIONAL SCHOLARSHIPS  
 UNIT FOR FOREIGNERS  
 AND CULTURAL EXCHANGES

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*Please  
 attach/insert  
 a recent  
 photograph  
 here*

**APPLICATION FOR A SCHOLARSHIP  
 STUDY OF THE GREEK LANGUAGE AND CULTURE IN GREECE  
 (24<sup>th</sup> PROGRAMME, ACADEMIC YEAR 2017-2018)**

*You are kindly requested to read the applicable announcement 2017-2018 (www.iky.gr) prior to your completing this application form which is to be submitted together with the supporting documentation to the Greek Diplomatic Authorities (embassy or consulate) in your home country.*

*Please use the Latin alphabet and complete in BLOCK CAPITALS (in Greek or English) using ink or typescript. Only complete documentation will be processed. If you need more space for your reply, please continue on a separate sheet and attach it to this form.*

**PERSONAL DETAILS**

1. Family 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: .....  
*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

**EDUCATION**

6. Degrees obtained (graduate/postgraduate) – Higher Education Institutions attended (please state the city and country):
    - a. ....
    - b. ....
  7. Class of degrees – Grade (Honours, Pass, etc.) (If any): .....
- .....

8. Date(s) of award: .....

**LANGUAGES**

9. Mother tongue: .....

10. Competency in Modern Greek language:  basic  
 moderate  
 good  
 fluent

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

**PROFESSIONAL EXPERIENCE**

12. Are you employed:      Yes                       No

13. Current employment / position: .....

14. Previous employment / experience: .....  
.....

15. Do you currently live in Greece or have you already lived in Greece in the past? Please state the period spent in Greece and for what purpose: .....  
.....  
.....

16. Please list any scholarships supported by the I.K.Y. or other awarding authority (*Greek or not*) you have applied for by indicating: a) the name of the awarding authority-institution b) the type and the duration of the scholarship c) the academic year:  
.....  
.....

17. Please provide information on any awards or prizes received: .....  
.....  
.....

18. Describe any potential benefits to your country of origin or your career that will result from the scholarship: .....

.....  
.....

19. Please state the reasons for which you declare your participation in this specific programme related with your information about Greece: .....

.....  
.....

20. Please state any serious medical problem or illness you are suffering from and enclose any relevant medical certificate (*translated in English or Greek language and certified accordingly - where applicable*): .....

.....  
.....

21. a. Passport/National Identity card/document number: .....

b. Date of issue: ..... c. Issuing Authority: .....

22. Father's name: .....

23. Gender: female  male

24. Marital status: .....

25. Permanent full home address (*street and number/Area/City/Postal Code/Country*):

.....  
.....  
.....

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

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27. Postal address (if different from the above mentioned during submission and selection period)

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

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.....

28. Telephone Number (+landline): .....

Mobile/Cell phone: ..... E-mail: .....

**Check list:**

1. A recent photograph
2. An up-to-date curriculum vitae
3. A recent (issued 1 month approximately prior to the application submission) 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. Certified\* copies of my University Degree(s) – Diploma(s)
5. Official certificates indicating the proficiency in Greek or English
6. A written evidence of previous or current employment as a teacher of Greek (if applicable)
7. Reference of two (2) academics
8. A certified copy of my passport/national identity card (where applicable)

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**\*Note:** If documentation is not in Greek or English, a certified translation (by the Greek Diplomatic Authorities) must be supplied. In addition, documents numbered 3, 4, 5 and 8 of the Call for Applicants 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 Award Announcement. I understand that submission of false or misleading information may be sufficient cause for refusal, withdrawal or termination of my scholarship.

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*Signature of applicant*

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*Date*

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***Only complete documentation will be processed. Any omission shall lead to the cancellation of application form. See the applicable Award Announcement and consult it throughout your study.***