

Please fill in LEGIBLY, read the Declaration at the end and sign before submitting

Family Name (Surname): \_\_\_\_\_

First Name (Given name): \_\_\_\_\_ Middle Name: \_\_\_\_\_

Mother's full (FAMILY and Given) name at birth: \_\_\_\_\_

Nationality: \_\_\_\_\_ Native language: \_\_\_\_\_

Gender: male  female  Marital Status: single  married

Date of Birth Year: \_\_\_\_\_ Month: \_\_\_\_\_ Day: \_\_\_\_\_

Place of Birth Country: \_\_\_\_\_ City: \_\_\_\_\_

**Mailing Address** (if you are accepted, this is the address to which your letter of acceptance will be sent)

Street & house no.: \_\_\_\_\_ City: \_\_\_\_\_

Postal code: \_\_\_\_\_ Country: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile/cell phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Passport number: \_\_\_\_\_ Country of issue: \_\_\_\_\_

Disability or chronic illness: No  Yes (Please specify): \_\_\_\_\_

**Emergency Contact**

Name of Next of Kin/Guardian/Contact: \_\_\_\_\_

Daytime phone: \_\_\_\_\_

Address: street: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_ Phone: \_\_\_\_\_

**Knowledge of English (if you are a native English speaker, please skip this section)**

TOEFL iBT / IELTS results/scores: \_\_\_\_\_

**Please indicate the specific program for which you would like to apply.**

**Bachelor program**

- Applied Economics
- Business & Management
- Communication and Media Science
- International Business
- International Relations
- Sociology

**Master program**

- Business Informatics
- Communication and Media Science
- Economic Analysis
- Economics of Family Policy and Public Policies for Human Development
- Finance
- Health Policy, Planning and Financing
- International Economy and Business
- International Relations

Marketing   
Master of Business Administration   
Public Policy and Management   
Regional and Environmental Economics   
Sociology

(You may apply for multiple study programs, however, the application fee must be paid for each program selected)

### For Bachelor Program Applicants ONLY

#### **Educational background – Secondary school**

Name of the school you graduated from: \_\_\_\_\_

Date of graduation: \_\_\_\_\_

**Mathematics test result (if applicable):** SAT Mathematics Level 2 / AP Calculus (AB or BC) / ACT (Mathematics part only): \_\_\_\_\_

### For Master Program Applicants ONLY

#### **Educational background**

**University:** \_\_\_\_\_

**Degree received or to be awarded (level and program name):** \_\_\_\_\_

**Date (or expected date) of graduation:** \_\_\_\_\_

#### DECLARATIONS:

I acknowledge that Corvinus University of Budapest, as data controller, registers and processes my above mentioned personal data to the extent necessary for admission, and, if admitted, for pursuing the tasks of the University, and that the University may transfer these data to specific places in the cases provided for in law.

If admitted, I request Corvinus University of Budapest to facilitate the request of a residence permit for the purpose of studies by transferring my personal data to the National Directorate-General for Aliens Policing.\*

\*I do not agree to the transfer of my personal data to the National Directorate-General for Aliens Policing, I will arrange for the request of a residence permit on my own.  (NB: Only tick this box if you **do not wish us to assist you** by facilitating your residence permit request)

I declare on my honor that the information I have provided is correct.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**IMPORTANT: Applications will only be processed after all of the required documents under the relevant program's site, including the proof of payment for the application fee, have been submitted.**

For more information please contact:

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