

APPLICATION FOR A DEMONSTRATORSHIP / STIPEND**2020/2021. Academic Year**

Name of Department

Applicant's name:

Applicant's Neptun code:

Applicant's present year/course:

Applicant's date and place of birth:

Applicant's mother's name:

Applicant's address:

Applicant's phone number:

Applicant's e-mail address:

Name of subject:

Student research activities:

.....

Further professional achievements:

.....

Knowledge of languages:

Participation in organizing events held by the Departments:.....

.....

Participation in research or teaching:

.....

Further professional/research activities:.....

APPLICATION FOR A DEMONSTRATORSHIP / STIPEND

2020/2021. Academic Year

I was active as a demonstrator

☐

..... (year)(department)

..... (year)(department)

..... (year)(department)

I have not been active as a demonstrator

☐

I was involved in Clinical work

☐

..... (year)(department)

I have not been involved in Clinical work

☐

Scholastic record

2019/2020. year (study average):

2018/2019. year (study average):

I. semester

I. semester

II. semester

Courses and marks of the selected subject

..... course/subject mark

..... course/subject mark

..... course/subject mark

Other:

.....

Budapest, 20..... (y) (m) (d)

.....

Signature of Applicant

APPLICATION FOR A DEMONSTRATORSHIP / STIPEND
2020/2021. Academic Year

OPINION OF THE HEAD OF DEPARTMENT

☐ I support the application ☐ I do not support the application

Duration of demonstratorship:

Amount of the stipend:

Budapest, 20..... (y) (m) (d)

.....

signature

OPINION OF HÖK (STUDENT UNION OF SEMMELWEIS UNIVERSITY)

☐ we support the application ☐ we do not support the application

Budapest, 20..... (y) (m) (d)

.....

signature

APPLICATION FOR A DEMONSTRATORSHIP / STIPEND**2020/2021. Academic Year****DECISION OF THE DEAN OF THE FACULTY**☐ The Applicant was awarded the Stipend/Demonstratorship

(upon recommendation by the Head of Department)

☐ The Applicant was awarded the Stipend/Demonstratorship with the following

modifications :

.....

☐ The application was not successful

Duration of demonstratorship:

Amount of the stipend:

Budapest, 20..... (y) (m) (d)

.....

signature