



## Visiting Master's Application Supplement

Last name: ..... First name: .....

Date of birth (dd/mm/year): ..... / ..... /.....

I want to come for the following period:.....  
(Please note that you can come for the whole academic year, for one semester or for a shorter period)

I hereby apply for the Visiting Master's scheme. I understand the conditions of the program, as published at <http://www.cerge-ei.cz/visiting-masters-admissions/vm-program-outline>

I understand that:

- I can join the Visiting Master's scheme only after I have enrolled in the Master's program at my home university.
- During the period of the Visiting Master's scheme I am a student of the university I am enrolled in.
- I have to arrange with my home university the conditions of my Visiting Master's stay at CERGE-EI, including the recognition of grades.

Date: ..... Signature: .....

Please email the filled out and signed supplement to the CERGE-EI PhD Study Affairs Office at [visiting@cerge-ei.cz](mailto:visiting@cerge-ei.cz).