



EUNICE MOBILITY OPPORTUNITY AT POZNAN UNIVERSITY OF TECHNOLOGY

First name _____

Middle name _____

FAMILY NAME _____

Address _____

Gender _____

Age _____

Date of birth _____

Place of birth _____

Nationality _____

e-mail _____

Contact telephone number _____

Position _____

Field of study _____

Theme of doctoral dissertation _____

Faculty _____

School/ Institute _____

Passport number _____

Passport Issue date _____

Passport Expiry _____

Bank name _____

Account number _____

SWIFT/BIC _____

Recipient bank country _____

Account maintenance currency _____

Date and signature

