(SCHOOL CATEGORY)



Infographic Competition – GERMAN UNITY DAY

Application Form - Scholarship for German-Learning Students 2024

DEADLINI	E: 19TH	OCTOBER	2024
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LAST NAME:		FIRST NAME:	
GENDER (M/F):		DATE OF BIRTH : (dd/mm/yy)	
ADDRESS:			
EMAIL:			
PHONE NUMBER:			
SCHOOL NAME:			
CLASS/ STUDY PROGRAMME:			
If you are under 18 years old:			
FULL NAME OF LEGAL GUARDIAN			
EMAIL:			
PHONE NUMBER:			
*Applicant's Signature, Date		Parent's Signature, Date (if applicable)	
*By signing,			
☐ I consent to my work being used the Goethe-Institut, and upon conse			ited to the channels of
☐ I hereby affirm that the work su	bmitted is ent	irely my own.	
☐ I certify that no part of this wor acknowledgment. I acknowledge my predominantly generated through t	y responsibilit	y to ensure that the work pro	

I understand that failure to comply with these terms may result in disqualification.