UNIVERSITY OF PELOPONNESE   **INTERNATIONAL OLYMPIC ACADEMY**

MASTER'S DEGREE PROGRAMME
"OLYMPIC STUDIES, OLYMPIC EDUCATION,
ORGANIZATION AND MANAGEMENT OF OLYMPIC EVENTS"

APPLICATION 2020-2021

TO THE SECRETARIAT OF THE MASTER'S DEGREE PROGRAMME

Personal Details

Surname			
First name			
Date of birth		ID card/Passport:	
Address			
Telephone number:		Mobile:	
E-mail:			

I declare that I apply for the Master's Degree Programme "Olympic Studies, Olympic Education, Organization and Management of Olympic Events" for the academic year 2020-2021.
All required documents are attached to this application and the relevant information is provided.

Higher Education

Institution*:			
Department:			
Degree:			
Official duration of studies:		Grade:	
Type of studies:			
Title and grade of thesis:			

Institution*:			
Department:			
Degree:			
Official duration of studies:		Grade:	
Type of studies:			
Title and grade of thesis:			

*name of institution, type, place and country

Secondary Education

Institution:			
Main course of study:			
Years of attendance:		Grade:	

Knowledge of Languages

Language	Certificate	Level of Knowledge
English:		
Other languages:		

Brief summary of Professional Experience
Include the job title/s, the duration and the employee/s etc

Brief summary of Research activity and/or scientific work
i.e. copy of publications in scientific journals, copy of published work etc

Participation in sports
i.e. sports activities, IOA activities, seminars on Olympic Education etc

Extracurricular activities

Motivation
I pursue participation in the Postgraduate Programme for the following reasons:

☐ By applying I consent, agree and recognize the processing of my personal data to be lawful as it is necessary for the purposes of the Master's degree programme. (GDPR-General Data Protection Regulation, EU 2016/679).

☐ I'm interested in applying for a scholarship if available.
(institutions which will provide scholarships will define the requirements)

☐ I'm interesting in the programme regardless the outcome of the scholarships.
(by checking this you won't be eliminated from the process if the application for scholarship is not successful)

Date   _____   Signature   _____