



## EXPRESSION OF INTEREST FORM

Registration at BRIE Office
Date of Receiving:
<b>Commission statement:</b>

### Information for potential applicants

Please, fill in the **EXPRESSION OF INTEREST FORM** and send it to: **brie@uni-ruse.bg**

**Please, do not hesitate to contact us:**

**Tel: 00359 82 82 56 62**

**Fax: 00359 82 82 56 62**

**Please, visit our website:**

**[www. brie.uni-ruse.bg](http://www.brie.uni-ruse.bg)**

### 1. Personal Data

Family Name	<input type="checkbox"/> male <input type="checkbox"/> female
First Name(s)	Date of Birth (dd/mm/yy):
Citizenship:	Nationality:
Home Address:	Contact Address (if different from home address):
Telephone:	Telephone:
Fax:	Fax:
E-mail:	E-mail:

### 2. Previous and Current (if any) Education

Subject/Course	University/Institution	Duration (from...to...)

### 3. English Language Skills

Level of knowledge:			
Reading:	<input type="checkbox"/> beginner <input type="checkbox"/> intermediate <input type="checkbox"/> very good	Writing:	<input type="checkbox"/> beginner <input type="checkbox"/> intermediate <input type="checkbox"/> very good
Listening:	<input type="checkbox"/> beginner <input type="checkbox"/> intermediate <input type="checkbox"/> very good	Speaking:	<input type="checkbox"/> beginner <input type="checkbox"/> intermediate <input type="checkbox"/> very good

4. German Language Skills (if any)

Level of knowledge:					
Reading:	<input type="checkbox"/> beginner	<input type="checkbox"/> intermediate	<input type="checkbox"/> very good	Writing:	<input type="checkbox"/> beginner <input type="checkbox"/> intermediate <input type="checkbox"/> very good
Listening:	<input type="checkbox"/> beginner	<input type="checkbox"/> intermediate	<input type="checkbox"/> very good	Speaking:	<input type="checkbox"/> beginner <input type="checkbox"/> intermediate <input type="checkbox"/> very good

5. Please, rank the master programmes according to your preference, and fill in 1 for first choice, and 2 for second choice

Four-Semester Master Programme	Choice (1 or 2)	Please, circle the academic year, in which you would prefer to start studies
European Studies and Regional Cooperation		2018, 2019, 2020
European Studies and Public Administration		2018, 2019, 2020

6. Please, express your preference for the costs of study. Please, circle YES or NO.

I would apply for the chosen master programme in case grants are provided to cover my semester tuition fee of 500 EUR <b>Note:</b> in accordance with the Bulgarian legislation students of Bulgarian origin pay 30% of the fee, that is 150 euro	YES or NO
I would apply for the chosen master programme in case grants are provided to cover my semester tuition fees of 500 EUR and my living expenses of 250 EUR per month	YES or NO
I would apply for the chosen master programme even if I have to cover myself tuition fees and living costs	YES or NO

7. Please, express your motivation for studies at BRIE

Place: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Thank you for your cooperation !