Please complete the application form electronically. Please scan the signed form and email it with all additional documentation to **applications-sspg@ethz.ch**.

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| 1. **Personal information** |

|  |  |
| --- | --- |
| Family name(s) |  |
| Given name(s) |  |
| Preferred given name |  |
| Date of birth |  |
| Degree |  |
| Gender | Female  Male |
| Nationality |  |
|  |  |
| Hometown (Swiss) |  |
|  |  |
| Swiss student number (if Swiss) |  |
| Swiss social security number (if Swiss) |  |

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| 1. **Contact information** |

|  |  |
| --- | --- |
| E-Mail |  |
| Mobile phone |  |

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| **Current address** (will be used as postal address) |

|  |  |
| --- | --- |
| Street, no. |  |
| ZIP, City |  |
| Additional information (e.g. P.O.Box) |  |

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| 1. **Application details, relations to ETH Zurich** |

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| --- | --- |
| Legal residence (Secondary Education) |  |
| Applicant previous degree from: | Swiss university |
|  | Foreign university |

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| **Relations to ETH Zürich** |

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| Have you contacted any lecturers? If yes, which one? |  |
|  |  |
| Are you an employee of ETH Zurich? | Yes  No |

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| 1. **Language skills** |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Native language | A1 | A2 | B1 | B2 | C1 | C2 |  |
| English |  |  |  |  |  |  |  |  |

|  |  |
| --- | --- |
| Other native language? If yes, which one? |  |

[Link](https://europass.cedefop.europa.eu/resources/european-language-levels-cefr) to European language levels – Self assessment grid

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| 1. **Higher education** |

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| Highest degree |

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| --- | --- | --- | --- | --- |
| Institution, City | Country | Start (dd.mm.yyyy) | End (dd.mm.yyyy) | Years |
|  |  |  |  |  |
| Degree | Major | Completion (dd.mm.yyyy) | GPA | Grading Scale Max Pass Min |
|  |  |  |  |  |
| Field |  |  |  |  |
|  |  |  |  |  |
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| 1. **Professional work experience** |

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| --- | --- |
| Work experience | year(s) |
| Current job position |  |

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| 1. **Attachments** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Passport photo in electronic form  Copy residence confirmation (Swiss) or copy passport (foreigner)  CV |  | Copy university degree record:  bachelor, master (diploma, licentiate), doctorate  1 page letter of motivation |  |

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| Please send the complete documentation to: | **applications-sspg@ethz.ch** |

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| 1. **Confirmation** |

|  |  |
| --- | --- |
| I confirm that all information given in this application is complete and correct. I am aware of the fact that intentional or by negligence resulted misinformation can lead to the exclusion from the admission process or – if it is discovered only later – to the annulment of the admission. I authorize ETH Zurich to carry out other clarification, as far as this should be necessary for the evaluation of my application.  I am aware of the fact that I will be automatically registered at ETH Zurich and admitted definitively into the program, as soon as I receive the positive admission decision of ETH Zurich. No further confirmation of my participation in the program is necessary. If I like to withdraw after occurred admission from the program, a timely written notice of cancellation is compelling. By a late notice of cancellation fees will result. I agree that my contact data and photo are notified to other co-students and lecturers.  **By sending this form I accept the above mentioned points.** | |
| Date, city:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **To fill out by the programme manager:** |

|  |  |
| --- | --- |
| Admission decision: | Yes  No |
| Recommendation: | Yes  No |
| Basis for recommendation: | Higher Education  Professional experience |
| Date:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Signature:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |