ARALIK UNIVERSITY

KILIS 7 ARALIK UNIVERSITY

Accommodation Application Form

Type or Fill in this form by using CAPITAL LETTERS

Send the accommodation form no later than

20 August for Fall semester or 20 January for Spring semester.

- o Only application forms filled out completely will be processed
- $\circ\quad$ Due to the large number of applications, your preferred place of living cannot be guaranteed.

r	,
Hereby I apply for housing as an exchange student starting in the Fall semester 20 / Spring	
semester 20	
(Please fill in the year in which your study start at K7AU and check a box for the duration of your studies)	
PERSONAL DATA	
Surname:	First name:
Date of birth:	Place of birth:
Sex: □Female □Male	Smoker : □Yes □No
Nationality:	
Address:	
City:	Postcode:
Country:	Citizenship:
Telephone:	Fax:
E-mail:	
Expected date of arrival (day/month/year): / /	
YOUR HOUSING PREFERENCE	
Please tick at least one box. We advise you to prioritize your request (e.g. 1.single apartment, 2. students' hall of residence etc.)	
□ Private apartment	
☐ 2 single rooms in an apartment with shared facilities	
☐ 3 single rooms in an apartment with shared facilities	
With my signature below I confirm that:	
I am an eligible exchange student in the program as stated on the front side.	
I certify that all information provided by me is true.	
• I will inform you as soon as possible of any changes concerning the information I gave in this application form.	
application form.	
Date Student's signature	
Important note: Kilis 7 Aralık University can never guarantee the availability of a room, nor can it guarantee that it can offer you a room according to your specific preferences.	

Address:

Kilis 7 Aralık University Dış Ilişkiler Ofisi Rektörlük Binası Zemin Kat 79000 Kilis/TURKEY erasmus@kilis.edu.tr international@kilis.edu.tr