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*Please, fill in this form on computer.*

**REQUEST FOR EXTENSION OF SCHOLARSHIP STATUS**

**Name of applicant (full name as in passport):**

Stipendium Hungaricum ID (usually a 5 or 6-digit number on your Letter of Award):

Sending country:

Place of birth:

Date of birth:

Mobile number:

E-mail address:

NEPTUN ID:

**Name of your Institute:**

**Name of your study programme:**

**Study level (bachelor/master):**

Beginning of scholarship holder status (please indicate the original starting date):

Beginning of the scholarship holder status at your current institution:

First or second request for extension:

**Describe the reason for your extension:**

List of annexes (if any):

Date:

Signature of scholarship holder