

# SUMMER SCHOOL OF SLAVONIC STUDIES

Faculty of Arts of Charles University in Prague

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## Application Form

Thank you for considering to enroll in the Summer School of Slavonic Studies. Self-paying send this completed form together with the payment confirmation of 2 500 CZK (or equivalent) nonrefundable registration fee.

Surname, academic degrees \_\_\_\_\_

First name \_\_\_\_\_

First language \_\_\_\_\_ Citizenship \_\_\_\_\_

Contact address \_\_\_\_\_

E-mail \_\_\_\_\_

Fax \_\_\_\_\_ Tel. \_\_\_\_\_ Mobile \_\_\_\_\_

Occupation \_\_\_\_\_ Passport N° \_\_\_\_\_ Sex \_\_\_\_\_

Day, month, year of birth \_\_\_\_\_

Smoker \_\_\_\_\_ Vegetarian \_\_\_\_\_

Name and address of the university \_\_\_\_\_

I have studied Czech (where and how long) \_\_\_\_\_

- Participation: ▶ *self-paying internal* (with meal and accommodation – 35 000 CZK or equiv.)\*  
▶ *self-paying external* (without meal and accommodation – 18 000 CZK or eq)\*  
▶ *holders of stipends* (from the Ministry of Education, Youth and Sports of the Czech Republic (MŠMT ČR), or the Rectorate of Charles University)\*

\* Strike out what does not apply

I wish to attend:

A. The practical language course

B. The optional seminar

C. The lecture series on

|                                                     |                                                                                                     |                                                                                                                                             |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> I. ELEMENTARY LEVEL        | ---                                                                                                 | ---                                                                                                                                         |
| <input type="checkbox"/> II. LOW-INTERMEDIATE LEVEL | ---                                                                                                 | ---                                                                                                                                         |
| <input type="checkbox"/> III. INTERMEDIATE LEVEL    | - interpretation of authentic texts (reading and conversation)<br>- conversation for advanced level | - Czech history and culture (in English or German)                                                                                          |
| <input type="checkbox"/> IV. ADVANCED LEVEL         | - Czech literature<br>- conversation for proficient level<br>- Czech life and institutions          | - Czech linguistics and literary (in Czech)<br>- Czech culture and history (in Czech)<br>- Czech history and culture (in English or German) |

I declare that, if I attend the Summer School of Slavonic Studies, I will abide by the conditions set out in the prospectus.

Date.....

Signature.....

- ▶ Please consult the diplomatic representatives in your country for information about visa requirements for entering Czech Republic; these are different for each country and apply for it in time.
  
- ▶ We therefore strongly advise you to obtain health coverage in your own country for the entire period of your stay in Czech Republic.
  
- ▶ Please do not forget to inform us about a possible decision to cancel your participation in the course as soon as possible.

**Masarykova univerzita**  
**Filozofická fakulta**  
**KABINET ČEŠTINY PRO CIZINCE**  
**BRNO**

**Letní škola slovanských (bohemistických) studií**  
*Summer School of Slavonic (Czech) Studies*

**Přihláška na XLIX. běh LŠSS**

*Application for the XLIX. session of the Summer School*

16. 07. 2015 – 13. 08. 2016

foto

**Příjmení (Surname):** .....

**Jméno, titul (First name, academic degree):** .....

**Národnost (Nationality):** ..... **Pohlaví (Sex):** .....

**Státní příslušnost (Citizenship):** .....

**Datum a místo narození (Date and place of birth):** .....

**Adresa trvalého bydliště (Permanent residence address):** .....

.....

**Číslo cestovního pasu (Passport No.):** .....

**Tel.:** ..... **E-mail:** .....

**Zaměstnání (Occupation):** .....

**Češtinu studuji (I have been studying Czech language):**

**kde – adresa (where – address):** .....

**jak dlouho (how long):** .....

**Stupeň znalosti českého jazyka (Level of knowledge of Czech):\***

- začátečník (Beginner)
- mírně pokročilý (Pre-intermediate)
- pokročilý (Advanced)

**Forma účasti (I will take part as a):\***

- stipendista (scholarship holder) (uveďte instituci / state the institution)

- samoplátce (paying participant)  plná cena (full price) 34.400,- Kč (CZK)
- redukováná cena (reduced price) 26.000,- Kč (CZK)  
(bez ubytování / without accommodation)

**Žádám o ubytování na koleji (I request accommodation in hall of residence):\***  ANO (Yes)  NE (No)

**Jsem vegetarián (I am a vegetarian): \***  ANO (Yes)  NE (No)

**Jsem kuřák (I am a smoker): \***  ANO (Yes)  NE (No)

**Datum (Date)** ..... **Podpis (Signature)** .....

**Přiložte svůj životopis v češtině (začátečníci mohou přiložit životopis v angličtině)**  
*(Please enclose your CV written in Czech / beginners can write a CV in English)*

\* Označte vybranou variantu (Indicate as appropriate)

附件二

## APPLICATION 2016

Faculty of Arts of Palacký University Olomouc

Olomouc, July 22 – August 21, 2016

**PLEASE FIL OUT IN LEGIBLE BLOCK LETTERS<sup>1</sup>**

First name:  Other names:

Last name:  Date of Birth:  Sex:

Contact address:

Nationality:  Telephone/Fax:

E-mail:  ID/Passport No.:

**Please check the appropriate level**

I wish to study Czech for: beginners  low intermediates  intermediates  advanced

I will take part as: Scholarship holder  Paying participant

| Scholarship holders only<br>(four-week course):                                                                                   | Paying participants only: <sup>3</sup>                                     | Four-week course<br>July 22 – August 21, 2016                |  | Two-week course<br>July 22 – August 7, 2016                  |  |
|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|--------------------------------------------------------------|--|--------------------------------------------------------------|--|
| Accommodation <sup>2</sup><br>extra charge for a single room<br>170 € <input type="checkbox"/> 4.590 CZK <input type="checkbox"/> | Course & administrative fee<br>Accommodation<br>double room<br>single room | 830 € <input type="radio"/> 22.410 CZK <input type="radio"/> |  | 430 € <input type="radio"/> 11.610 CZK <input type="radio"/> |  |
|                                                                                                                                   |                                                                            | 280 € <input type="radio"/> 7.560 CZK <input type="radio"/>  |  | 140 € <input type="radio"/> 3.780 CZK <input type="radio"/>  |  |
|                                                                                                                                   |                                                                            | 450 € <input type="radio"/> 12.150 CZK <input type="radio"/> |  | 225 € <input type="radio"/> 6.075 CZK <input type="radio"/>  |  |

**Payment instruction:**

Beneficiary Name (the Account Owner): Univerzita Palackého v Olomouci  
Complete Address of the Account Owner: Křížkovského 8, 771 47 Olomouc

Beneficiary Bank Name: Komerční banka, a.s., Olomouc  
Bank Address: Třída Svobody 14, 772 14 Olomouc

**Payment in EUR**

Beneficiary Account Number: 43-3855090287/0100  
Reference Number (Variable Code): 21820012  
IBAN: CZ9801000000433855090287  
Swift Code: KOMBCZPPXXX  
Purpose of Payment (info): LSSS FF UP

**Payment in CZK**

Beneficiary Account Number: 19-1096330227/0100  
Reference Number (Variable Code): 21820012  
IBAN: CZ0901000000191096330227  
Swift Code: KOMBCZPP  
Purpose of Payment (info): LSSS FF UP

**For payment identification, please, indicate all payment data including the purpose of the payment and the reference number.**

Note: There are two kinds of discount offered to paying participants in 2016. For all information see our web pages (<http://LSSS.upol.cz>)

I arrive on  July

I depart on  August

Date:

Signature:<sup>4</sup> \_\_\_\_\_

- 1 Please, make sure all items are filled in. A sample application form is to be found on our web pages (<http://LSSS.upol.cz>).
- 2 Scholarship covers the accommodation in a double room. Single rooms are available to scholarship holders at an additional charge. See also Note 3 hereunder for making the payment in different currencies.
- 3 It is possible to make the payment in EUR or CZK. The payments in EUR are to be sent to the EUR current account, the payments in CZK to the CZK current account. Bank charges are always paid by the SSSL participants, not by SSSL.
- 4 Applicants agree to pay for the course by June 30, 2016. After the date, regrettably, we cannot guarantee enrolment at the Summer School of Slavonic Languages.

附件三

## APPLICATION FORM

I apply for the Summer Czech Language Course for foreigners in Poděbrady organized by the Institute for Language and Preparatory Studies of Charles University from July 4th till July 29th, 2016.

Surname:

First name:

Country:

Date of birth:

Home address:

Phone:

Fax:

Email:

Gender (M / F):

Smoker (yes/ no):

Knowledge of the Czech language:

I have never studied Czech (yes/no):

I have studied Czech before (yes/no):

How long? :

Where? :

I am interested in the language course at following level, underline please:

elementary / pre-intermediate / intermediate / advanced

Where did you get known about the Czech language and the Culture Course?

Special requests:

Date:

Signature:

Attach your photo, please – if possible:

Address: Univerzita Karlova  
Ústav jazykové a odborné přípravy  
Vratislavova 10/29  
128 00 Praha 2  
Phone: +420 224 990 420  
Fax: +420 224 990 440  
Web: www.ujop.cuni.cz  
E-mail: daniela.vlkova@ujop.cuni.cz

附件四