Protocol .:……………….

Date . :……………….

 **(Τo be completed by the secretariat)**

#

# REGISTRATION FORM

SURNAME: ………………………………………

NAME: …………………………………………

FATHER’S NAME: ………………………………

DATE OF BIRTH: ………………………………

PLACE OF BIRTH: ………………………………

## RESIDENTIAL ADDRESS

STREET: ………………………. NO.: ……..

CITY: …………………….. P.C.: ………………

REGION: …………………… TEL.:………………

MOBILE phone:…………………………………..

E-MAIL: …………………………………………..

## EDUCATIONAL QUALIFICATIONS

DIPLOMA DEGREE \*

UNDERGRADUATE

DEPARTMENT: …………………………………….

SCHOOL: ………………………………………….

UNIVERSITY: ……………………………………..

OTHER STUDY TITLES: ……………………………………………………..

CERTIFIED LANGUAGE(S): ……………………………………………………..

**\*** Tick the proper box

## TO

School of Chemical Engineering

National Technical University of Athens

9 Iroon Polytechniou Str.

157 72 Zografou

Following the approval decision of 01/08/2025 by the “Computational Mechanics” Committee, I hereby submit electronically the registration form and the required supporting documents:

* 1. Copy of identity card / passport
	2. Copy of diploma/degree certificate
	3. Tuition Fees Payment Receipt \*\*
	4. Certificate of Completion of Studies or Confirmation of Completion of Studies (applies to final-year students)

\*\*Only for NON-EU students

………………………………

(Date)

(Name, Signature)