وزارة التعليم العالر

جمهورية العراق وزارة التعليم العالي والبحث العلمي دائرة البعثات والعلاقات الثقافية قسم الدراسات خارج العراق شعبة الزمالات الدراسية

اعلان الرئاسات الثلاث / مكتب الرئيس الوزارات كافة/ مكتب الوزير الجهات غير المرتبطة بوزارة المحافظات كافة / مكتب المحافظ الجامعات كافة /مكتب رئيس الجامعة المجلس العراقي للاختصاصات الطبية / مكتب رئيس المجلس الهيئة العراقية للحاسبات /مكتب رئيس الهيئة غير الموظفين

السلام عليكم ورحمة الله وبركاته ...

تود دائرة البعثات والعلاقات الثقافية ان تنوه عن البدء ببرنامج المنح الدراسية في الجامعات اليونانية للسنة الدراسية ١٠ ٢٠ ٢٠ ٢ لكافة دول العالم ووفق التعليمات المرسلة من قبل مديرية الشؤون التربوية والثقافية في وزارة الخارجية اليونانية (المرفقة ربطاً)،

م/ منح دراسية في اليونان

الشروط و المستمسكات المطلوبة من قبل الجانب المانح:-

- الوثائق الدراسية الاصلية مصدقة من وزارة الخارجية العراقية ومترجمة الى اللغة اليونانية .
 - على ان لايقل عمر المتقدم عن الثامنة عشر (اعتباراً من شهر أيلول ٢٠١٨) .
- بالنسبة للمتقدمين على الدراسات العليا فلابد من حصولهم مسبقاً على قبول برنامج الدراسات (خطاب القبول شرط مسبق).
- سيكون آخر موعد للتقديم هو ٢٠١٩/٧/٢٥ ، على ان تسلم استمارات التقديم الى السفارة اليونانية في بغداد ولأسباب أمنية لا يتم استقبال أي متقدم للدراسات بدون حجز موعد مسبق عبر البريد الالكتروني التابع للسفارة التالي :- (gremb.bag@mfa.gr)

ملاحظة:-

- على المتقدمين للمنح أعلاه، التقديم على الرابط الخاص بدائرة البعثات والعلاقات الثقافية (http://scrdgate.scrdiraq.gov.iq) و ان تتوفر في المتقدم شروط وضوابط الزمالات المذكورة في النظام رقم (٣) لسنة ٢٠١٨ والضوابط المعتمدة والواردة في اعمامينا ذوي العدد . ١٨٠٨١ ، ٢٣٩٤ ، ١٨٠٨١ في ٢٠١٥/٨/١٨ و ٢٠١٧/٧/١٩ ولا تتحمل الوزارة أي تبعات مالية .
- في حال توفر منح دراسية للحصول على شهادة البكالوريوس ، فعلى المتقدمين ان تتوفر فيهم الشروط والضوابط المعتمدة في قناة النفقة الخاصة المتوفرة على الموقع الرسمي لهذه الدائرة مع التقدير ----

أ.م.د. أمجد عبد النبي السواد المدير العام لدائرة البعثات والعلقات الثقافية / مناس

ر... / للتفضل بالاطلاع ... مع التقدير ق الشؤون العلمية والعلاقات الدولية للتفضل بالاطلاع ... مع التقدير

www.scrdiraq.gov.iq

E-mail: scrd@mohesr.gov.iq

موقع دائرة البعثات والعلاقات الثقافية:

ايميل الدائرة



HELLENIC REPUBLIC MINISTRY OF FOREIGN AFFAIRS E1 DIRECTORATE OF EDUCATIONAL AND CULTURAL AFFAIRS

Postgraduate

SCHOLARSHIP PROGRAM - ACADEMIC YEAR 2019/ 2020

TERMS AND CONDITIONS FOR SCHOLARSHIPS OF POSTGRADUATE STUDIES IN GREEK HIGHER EDUCATIONAL INSTITUTIONS

1. Right of Application

- Foreigners of Greek descent, graduates of Greek or foreign Higher Educational Institutions.

- Foreigners, of other (non-greek) descent, graduates of Greek or foreign Higher Educational Institutions.

2. Duration of scholarship

- One academic year, to obtain the Greek language proficiency certificate, if necessary

- Three years of studies. One additional academic year (maximum) may be granded upon decision of El Directorate.

3. Provisions

- Relocation fee of 700,00 euros

- Monthly allowance of 368,00 euros

- Free medical care in state hospitals, in case of an emergency

- No tuition fees are supplied

4. Obligations

- The scholarship of the Greek language students is renewed on condition that the scholarship recipient has obtained the greek language proficiency certificate either in June or in September. - The scholarship recipient is obliged to attend regularly his/her studies and to present satisfactory

progress, continuity and stability in his/her performance.

- After the completion of their studies, scholarship recipients should return to their country to origin for a minimum period of 3 years.

The scholarship can be withdrawn at any time for non-satisfactory academic progress or for illegal or improper behaviour of the scholarship recipient.

5. Supporting documents (all foreign documents have to be duly certified and translated into Greek

- Application

- Copy of the Higher Educational Institution degree

- Certificate of Greek language (if any)

- Certificate of a Greek Higher educational Institution regarding the candidate's acceptance as a postgraduate student or for carrying out a doctoral thesis.

Curriculum Vitae

Two letters of recommendation as minimum

- Certificate of the relevant authority stating the scholarship recipient and his/her parents' citizenship and descent.
- 1 photograph

- Photocopies of passport pages.

6.The candidate's application will not be accepted, unless all supporting documents are submitted.

HELLENIC REPUBLIC MINISTRY OF FOREIGN AFFAIRS E1 DIRECTORATE OF EDUCATIONAL AND CULTURAL AFFAIRS

SCHOLARSHIP PROGRAM - ACADEMIC YEAR 2019/20 APPLICATION FOR A SCHOLARSHIP FOR POSTGRADUATE STUDIES IN GREECE

(You are kindly requested to answer each question as clearly and fully as possible in Latin and capital letters. If you need more space for your reply, please continue on a separate sheet and attach it to this form).

	TY' 1
The undersigned	a Higher
Education graduate, applies for postgraduate studies / P.H.D.	at a Greek
University to which I have been accepted.	
PERSONAL DATA	
1. Mr. Ms.	
2. Surname	
3. First name(s)	
4. Father's name	
5. Mother's name	
6. Place of birth	
7. Date of birth	
8. Citizenship	
9. Please mention if of Greek origin	
10.Marital Status: Single Married	
11. Name and age of dependents	
12 Current occupation	
13. Address (please write out the postal address of you	permanen
residence)	
14 Telephone number(s)	
(e-mail)FAX	
STUDIES	
Educational Institution of graduation	
Place (country, town)	
Degree in	•

Postgraduate course in Greece (or P.H.D.,) at v	A DE CHERRENTONIO CONTROL DE CONT

What will your plans be after you have finished	Vour postoraduate studies?
Other information.	
- Do you already hold a scholarship from the G Institution or Organization, in Greece or abroad	reek Government or any other? Please, specify

Greek entity in the past? Please, specify:	eek Government or any other
- Have you currently applied for another scholar yes, please specify:	rship, in Greece or abroad? If
- Has any other member of your immediate far husband or wife) held any Greek scholarship, no Please, specify	nily (parent, brother or sister, w or in the past?
Please, specify	Service 19.
I hereby confirm that I have read the schoand I agree to be bound by them.	olarship terms and conditions
(place)	
(p.idoc)	(date)
(applicant's signat	ure)

YOU ARE KINDLY REQUESTED TO KEEP A COPY



HELLENIC REPUBLIC MINISTRY OF FOREIGN AFFAIRS E1 DIRECTORATE OF EDUCATIONAL AND CULTURAL AFFAIRS

Undergraduate

SCHOLARSHIP PROGRAM - ACADEMIC YEAR 2019/2020

TERMS AND CONDITIONS FOR SCHOLARSHIPS OF UNDERGRADUATE STUDIES IN GREEK UNIVERSITIES AND INSTITUTES OF TECHNOLOGY.

1. Right of Application

- Foreigners of Greek descent, who have been living abroad for the immediately preceding five years at least.
- Foreigners of other (non-greek) descent, who live abroad.

2. Duration of scholarship

- One academic year, to obtain the Greek language proficiency certificate, if necessary.
- Institution set academic term
- Additional time of two years for acquisition of a degree.

3. Provisions

- Relocation fee of 700,00 euros
- Monthly allowance of 368,00 euros
- Exemption from tuition fees of the Greek language course's
- Free textbooks, with the exemption of the Greek language course's books
- Free medical care in state hospitals

4. Obligations

- The scholarship of the Greek language students will be is renewed on condition that the scholarship recipient has obtained the greek language certificate either in May or in September.
- The scholarship during the undergraduate studies is renewed on condition that the scholarship recipient has passed successfully 30% of his/her examination.
- The scholarship recipient is obliged to attend the lectures regularly and to sit all term exams.

- After the completion of their studies, scholarship recipients should return to their country to origin for a minimum period of 3 years.

- The scholarship can be withdrawn at any time for non-satisfactory academic progress or for illegal or improper behaviour of the scholarship recipient.

- 2/2 -

5. Supporting documents (all foreign documents have to be duly certified and translated in to Greek).

- Application with three choices of courses.

- Curriculum Vitae

- Title of Graduation from Secondary School.

- Certificate of Greek Language (if any)

- Certificate regarding the scholarship recipient's and his/her parents' citizenship and ethnic descent, issued by the relevant foreign Authority.

- Certificate issued by the relevant authority of the candidate's country stating that his/her title of studies enables him/her to enroll to a Higher Education Institution of that country.

- Certificate issued by the Greek Diplomatic Authority abroad stating that the candidate and his parents have been living abroad for the last five years at least and that the parents are not employed by the Greek Government.

- 1 photograph

- Photocopies of passport pages.

6. The candidate's application will not be accepted, if any of the supporting documents are missing or are not satisfactory.

HELLENIC REPUBLIC MINISTRY OF FOREIGN AFFAIRS E1 DIRECTORATE OF EDUCATIONAL AND CULTURAL AFFAIRS

SCHOLARSHIP PROGRAM – ACADEMIC YEAR 2019/20 APPLICATION FOR A SCHOLARSHIP FOR UNDERGRADUATE STUDIES IN GREECE

(You are kindly requested to answer each question as clearly and fully as possible in capital letters. If more space is needed, please continue on a separate sheet and attach it to this form).

The undersigned	, a Secondary
Education graduate, applies for an undergraduat	e studies scholarship at a
Greek University or Institute of Technology.	
PERSONAL DATA	
1. Mr. Ms.	
2 Common 2	
3 First name(s)	
4. Father's name	***********
5 Mother's name	
6 Place of birth	
7 Date of hirth	
8 Citizenship	
9.Please mention if of Greek origin	
10 Marital Status: Single Married Married]
11. Name and age of dependents	
12 Current occupation	***********
13 Address(please write out the postal address of years)	our permanent residence)
14. Telephone number(s)	
e-mail)F	AX

STUDIES Subject of planned studies. Please s	state at least 3 choices:
1	
2	
3	
Foreign languages (excellent-good	-basic knowledge,please state)
- Do you already hold a scholarsh Institution or Organization, in Gree Please specify	ip from the Greek Government or any other
- Were you awarded a scholarshi	p from the Greek Government or any other pecify
- Have you currently applied for	another scholarship, in Greece or abroad? If
- Has any other member of your husband or wife) held a Greek	immediate family (parent, brother or sister, scholarship, now or in the past? Please
	d the scholarship terms and conditions and I
(place)	(date)
(8	applicant's signature)

YOU ARE KINDLY REQUESTED TO KEEP A COPY