# REGISTRATION FORM

for a study visit on the basis of the exchange agreement between University of Ljubljana and

1. Surname: Name:

2 Academic title:

3. Subject, field of research:

4. Telephone: E-mail:

5. Place of work:

6. Programme of visit:

a) Purpose of visit:

b) Department to be visited:

c) contact at host university

d) Proposed lecture /title

7. Duration of the visit:

8. Proposed dates:

Signature