



# UNIVERSITY OF DEBRECEN ALUMNI REGISTRATION FORM



mailing address:

Debreceni Egyetem Kancellária Rendezvénykoordinációs és Alumni Központ  
4032 Debrecen, Egyetem tér 1.

## REGISTRATION\*

- Free membership
- Active membership (alumni card costs 2500 HUF)

## PERSONAL INFORMATION

Name\*:

Neptun code:

*(if you provide the code, you do not have to answer the rest of the questions referring to personal information)*

Maiden name:

Date of birth\*:

Place of birth\*:

Mother's name\*:

Gender\*:

Nationality\*:

Academic degree:

## CONTACT

Permanent address\*:

Mailing address:

E-mail address\*:

Webpage:

Mobile number/telephone number:

## RELATIONSHIP WITH THE UNIVERSITY OF DEBRECEN OR ITS LEGAL PREDECESSORS\*:

- Student/ Former student
- Lecturer
- Visiting professor/ researcher

*If you are a (former) student of any of our faculties, please provide your educational details:*

Type of education:

Faculty:

Major:

(Expected) Year of graduation:

**WORKPLACE INFORMATION:**

Current place of employment\*:

(if you do not have a workplace at present or you have just graduated, please mention above)

Occupied position:

Establishment's website:

I hereby declare that I accept the Regulation of Alumni as binding with regard to myself. As a member of UD Alumni, I aim to preserve the good reputation of the institution and to cultivate the traditions of the university as well as to abstain from any behaviour that is not reconcilable with the spirit of the University of Debrecen. I will not misuse my membership, and I will use the database exclusively in accordance with its purpose. I acknowledge that my membership and entitlements related to it cannot be transferred.

I hereby agree that the Alumni system of the University of Debrecen may keep a record of my data. The institution is not allowed to release the provided information to any other persons and/or organizations. Said information is to be exclusively used for the purposes of supporting curricular activities as well as following up on post graduation career paths.

I agree to report any and all information changes on the registration surface within 2 weeks' time.

I hereby allow the University of Debrecen the right to provide me with information regarding my studies and programs organized for Alumni members based on my contact details.

Yes

No

Date: .....(day) ..... month 20.....

.....

signature

\*Required field.