



# APPLICATION FORM

Ateneum Studiecetrum och Studenthem  
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Name: \_\_\_\_\_

Surname \_\_\_\_\_

Birth day and year: \_\_\_\_\_

Home address: \_\_\_\_\_

City: \_\_\_\_\_

Postal code: \_\_\_\_\_

Tel: \_\_\_\_\_ Mobilnr: \_\_\_\_\_

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

I wish to live in the residence Ateneum from \_\_\_\_\_ to \_\_\_\_\_

My actual studies: \_\_\_\_\_

Place: \_\_\_\_\_

Study credits: \_\_\_\_\_

What are you planning to study in Stockholm? : \_\_\_\_\_

\_\_\_\_\_

Tell us something about yourself and your interests: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have some food allergies or diet? \_\_\_\_\_

\_\_\_\_\_

Place \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_

Signature