

**SEELS Membership Application**

|  |  |
| --- | --- |
| University:  |  |
| Faculty  |  |
|  Address:  |  |
| Tel. n°:  |  |
| Fax n°:  |  |
| e-mail address:  |  |
| Http://  |  |

Hereby declares to apply as member of the South East European Law School Network [SEELS] and assume all rights and obligations of the membership and to pay the annual membership fee as set by the Management Board of the SEELS.

With this application we submit the set of administrative information (SEELS Questionnaire) and the set of information about the Faculty (applicant’s biography) as required to the membership.

We understand and accept that the decisions for adhering to membership are made solely by the Management Board of SEELS and that he application may be refused without further explanations. We understand and accept that the type of our membership will be decided by the Management Board of the SEELS.

Name of representative:

Position:

Signature Date

1. **SEELS questionnaire**

SEELS is establishing a database system in order to provide a better service to its members. The information given will not be released, but only used for SEELS activities.

**1. General information**

|  |  |
| --- | --- |
| Official name of the University: (in the national language and alphabet) |  |
| Name of the University in English:  |  |
| Official name of the Faculty of Law: (in the national language and alphabet)  |  |
| Name of the Faculty of Law in English: |  |
| Full postal address of the Faculty: Street Postal code and cityCountry |  |
| Tel. n°:  |  |
| Fax. n°:  |  |
| Website  |  |

**2. Information about the Dean**

In this section we would like to get the full contact details of the deans.

|  |  |
| --- | --- |
| Title, first name and last name of the Dean: |  |
| Address (if different from the general address above): |  |
| Direct fax of the Dean:  |  |
| Direct e-mail of the Dean:  |  |
| General telephone of the Dean’s office:  |  |
| General fax of the Dean’s office:  |  |
| General e-mail of the Dean’s office:  |  |

**3. Information about the SEELS representative**

The SEELS representative is the person within your faculty who will represent your faculty on the SEELS Management Board. The SEELS representative should be authorized by the faculty will full voting powers and decision making.

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If the Dean will act as SEELS representative, please tick this box:

If the SEELS representative is not the same person as the Dean, please complete the following:

|  |  |
| --- | --- |
| Title, first name and last name of the representative:  |  |
| Position:  |  |
| Address (if different from the general address above):  |  |
| Direct telephone:  |  |
| Direct fax:  |  |
| Direct e-mail:  |  |

**4. Information about the SEELS administrative person**

The SEELS representative is the person within your faculty who will act as a liaison officer and who shall be contacted for the delivery of SEELS activities. The SEELS administrative person should be authorized by the faculty to receive and provide information.

|  |  |
| --- | --- |
| Title, first name and last name of the representative:  |  |
| Position:  |  |
| Address (if different from the general address above):  |  |
| Direct telephone:  |  |
| Direct fax:  |  |
| Direct e-mail:  |  |

1. **Applicant Biography**

Please, in narrative form, provide the following information about your University/Faculty.

* Date of establishment of the University and the Faculty
* Total number of enrolled and graduated students as of establishment
* Average number of enrolled and graduated students per year
* System of the organisation of the studies (first, second and third cycle)
* System of administrative organisation (Dean’s Office, Institutes, Cathedras, Administration)
	+ Members of the Dean’s Office
	+ List of Institutes and Cathedras
	+ Teaching Staff
		- Number of full-time professors, associate professors and assistant professors employed by the faculty ( if the faculty contracts teaching staff please provide the information in separate paragraph)
		- Number of Teaching and Research Assistants employed by the faculty ( if the faculty contracts teaching staff please provide the information in separate paragraph)
	+ System of Administration
* Units of the faculty (such as but not limited to centres, research units, libraries etc.)
* Participation in international projects in the past 5 years
	+ Brief description of projects the Faculty coordinated (project goal, partners, budget, source of funding)
	+ Brief description of projects the Faculty participated in (project goal, partners, budget, source of funding)