



Protocol  
Number:

E ..... /.....

REPUBLIC OF CYPRUS

ΚΥΠΡΙΑΚΟ ΣΥΜΒΟΥΛΙΟ ΑΝΑΓΝΩΡΙΣΗΣ  
ΤΙΤΛΩΝ ΣΠΟΥΔΩΝ (ΚΥ.Σ.Α.Τ.Σ.)

CYPRUS COUNCIL FOR THE RECOGNITION OF  
HIGHER EDUCATION QUALIFICATIONS (KY.S.A.T.S.)

Διεύθυνση: Υπ. Παιδείας, Πολιτισμού, Αθλητισμού και Νεολαίας  
Γωνία Κίμωνος και Θουκυδίδου  
1434 Ακρόπολη - Λευκωσία  
Τηλέφωνο: + 357 22 806357  
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Address: Ministry of Education and Culture, Sports & Youth  
Kimonos and Thoukydidou Corner  
1434 Nicosia  
Telephone: + 357 22 806357  
Fax: + 357 22 800866  
e-mail: info@kysats.ac.cy

APPLICATION FOR RE-EVALUATION

Please read carefully the instructions on page 4, before filling the application

PART A: PERSONAL INFORMATION OF THE APPLICANT

First Name: .....  
Surname: .....  
Sex: Male  Female   
Date of birth: .....  
Identity Card No/Passport No: .....  
Telephone Number: .....

Contact address: .....  
.....  
.....  
.....  
Post code: .....  
E-mail: .....

PART B: APPLICANT'S STATEMENT FOR DEGREE RE-EVALUATION

Please re-evaluate my application for the recognition of the degree/award:.....  
.....  
..... with protocol number: .....

a. AS 'EQUIVALENT' TO:

b. AS 'EQUIVALENT AND CORRESPONDENT' TO:

- CEFTIFICATE OF ONE YEAR POST SECONDARY STUDIES
- DIPLOMA OF TWO YEARS POST SECONDARY STUDIES
- HIGHER DIPLOMA
- BACHELOR'S DEGREE (PTYXIO)
- CERTIFICATE OF POSTGRADUATE STUDIES
- MASTER'S DEGREE
- DOCTORATE DIPLOMA

BACHELOR'S DEGREE in  
the field:   
.....  
.....  
.....  
.....

PART C: APPLICANT'S STATEMENT FOR CO-EVALUATION OF DEGREES

I request my degree to be co-evaluated with the following degree(s)  
.....  
.....

(Initials) \_\_\_\_\_



**PART E: DECLARATION**

I, .....,  
being aware of all the consequences of the law, declare that the information stated in this application is true  
and all attached documents are genuine.

I authorize the Cyprus Council for the Recognition of Higher Education Qualifications (KY.S.A.T.S.) to keep,  
in printed or electronic form, all personal data submitted within the recognition procedure, according to the  
Processing of Personal Data (Protection of Individuals) Law.

Date (dd/mm/yyyy) ..... Signature. ....

FOR OFFICIAL USE ONLY
Protocol number: .....
Pending documents: .....
Date of submission: .....
Received by: (Name/Surname) .....
Signature: .....

## **INSTRUCTIONS**

### **DOCUMENTS REQUIRED FOR THE SUBMISSION OF A RE-EVALUATION APPLICATION**

#### **The following documents must be submitted along with the re-evaluation application**

- a. Additional information and supplementary documents
- b. Official translation in Greek or English if the documents submitted are in any other language

*Official translations of degree(s) and related documents are accepted only by:*

- The awarding Institution.
  - Registered Sworn Translators of the Republic of Cyprus.
  - The Relevant Ministry of the awarding country (e.g. Ministry of Foreign Affairs).
- c. Receipt for Payment the re-evaluation fee.

#### **Note:**

- During the re-evaluation process, and if need arises, the applicant may be asked to submit additional documents or be invited to an interview for further clarifications.
- Re-evaluation fee is €170.86
- The Certificate is issued only upon the request of the applicant for the amount of €34.17.
- Each page of the application form must be initialed by the applicant
- All Documents submitted shall not be returned to the applicant.

**Applications can be submitted only on Mondays and Tuesdays, between 08:30 and 14:00 by appointment. To schedule your appointment please contact KY.S.A.T.S at 22806357.**