Application for Accreditation cESLog

# Applicant

Organisation:

Address

Zipcode & Place

Country

Website

Contactperson

Email

Telephone +

# Registration

Registered at

For example one of https://www.eqar.eu/register/search.html

Reference of registration

Website

Contact email

Contact telephone +

# Program

Name

Level Bachelor or Master [[1]](#footnote-1)

Average number of students

Date

1. Please circle the level for this program [↑](#footnote-ref-1)