

## APPLICATION FORM FOR ADMISSION

photo

PERSONAL INFORMATION	Surname (family name):				PASSPORT	Number:				
	First name (-s):					Date of issue:				
	Middle name:					Date of expiry:				
	Date of birth (YYYY-MM-DD):					Country obtaining a Visa:				
	Country of birth:				EDUCATION	Name of secondary school:				
	Nationality:					Address of secondary school:				
	Religion:					Date of graduation:				
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female					Secondary school certificate number:				
	Marital status: <input type="checkbox"/> Single <input type="checkbox"/> Married					Certificate supplement copy is attached: <input type="checkbox"/> Yes				
	Mobile telephone:					Other educational institutions, courses you've attended (optional):				
	E-mail:									
	Spoken foreign languages: <input type="checkbox"/> English <input type="checkbox"/> German									
	<input type="checkbox"/> French <input type="checkbox"/> Spanish									

ADDRESS	Postal Code	Country	City	Street, house, apartment	Phone number
Of actual residence					
For sending study invitation					

INFORMATION ABOUT PARENTS	HOME ADDRESS					Employment, profession
	Postal Code	Country	City	Street, house, apartment	Phone number, e-mail	
Father's name:						
Mother's name:						

PLANNED EDUCATIONAL CHOICE		
Planned educational course <input type="checkbox"/> Preparatory Department for learning a Ukrainian language (1 year) <input type="checkbox"/> Preparatory Department for learning a English language (1 year) <input type="checkbox"/> Bachelor's degree (4 years) <input type="checkbox"/> Master's degree (1,5 years)	Base trend of training at the Preparatory Department <input type="checkbox"/> Engineer-Technical <input type="checkbox"/> Medical-Biological <input type="checkbox"/> Humanitarian	Planned year of enrollment: 20__ <hr/> Chosen language learning: <input type="checkbox"/> English <input type="checkbox"/> Ukrainian <hr/> Chosen specialty: _____

I certify that the information given in this application is complete, true and correct. I take full responsibility for those educational documents to be transfer. Untrusted data is the reason for me to not enroll in university (or further deductions).  Yes

Date of filling in «__» _____ 20__	Signature
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**Note: While sending this application form YOU SHOULD ADD to it:**

- copy (-ies) of passport
- copy (-ies) of the certificate about education
- copy of the certificate supplement
- application for the consent of the processing of personal data