|  |
| --- |
| **APPLICATION FOR MASTER'S STUDIES** |
| **Study program:** |  |
| **Name:** |    | **Sex:** |
| **Surname:**  |    | **Citizenship - Country:**  |
| **Family name:**  |    | **Marital status:**  |
| **Degrees (following the name):** |    | **Health status** **(special needs):** |
| **Birth information:** | **Day:** | **Number of passport:** |
| **Month:** | **(or) ID card number\*:**  |
| **Year:** | **Birth number:** |
| **Place:**  |   |
| **Permanent address,****Contacts:** | **Country:** | **E-mail:** |
| **City:** | **Phone\*:** |
| **Street:** | **Contact adress\*:** |
| **Post Code:** |   |
| **Education:** | **University/College:**  | **Year of Graduation:** |
| **City:** | **Subject/Field:** |
| **The applicant is studying now:**  | **Year of presumed end:**  |
| **City:** |  **Subject/Field:** |   |
|  |

**\*no need**

**In (City) ………………………. Date……………………. Signature……………………**