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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | |  | | **APPLICATION FORM**  to study in the | | | | | | | |  |
|  | | Choose School | | | | | | | |  |
|  | | *(name of School)*  Far Eastern Federal University | | | | | | | |  |
|  | |  | |  | | | | | | | |  |
| 1. | Family name, given name | | | | | | | |  | | | |
|  | *in Russian* | |  | | | | | | | | | |
|  | *in English* | |  | | | | | | | | | |
|  | *in native language* | |  | | | | | | | | | |
| 2. | Country of current residence | | | |  | | | | | | | |
| 3. | Date of birth (*day, month, year*) | | | |  | | | | | | | |
| 4. | Place of birth (*city, province*) | | | |  | | | | | | | |
| 5. | Marital status | | | |  | | | | | | | |
| 6. | Permanent home address, telephone (*in native language*) | | | | | | | | |  | | |
|  |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 7. | Permanent home address, telephone (*in English*) | | | | | | | | |  | | |
|  |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 8. | E-mail | | | |  | | | | | | | |
| 9. | Address and Telephone in Vladivostok | | | | | | |  | | | | |
|  |  | | | | | | | | | | | |
| 10. | Education (*name of school, location, dates of entering and graduation*) | | | | | | | | | | | |
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|  |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 11. | Your job (*occupation*) before entering FEFU, working period | | | | | | | | | |  | |
|  |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 12. | What foreign languages do you know? | | | | | |  | | | | | |
|  |  | | | | | | | | | | | |
| 13. | FEFU Educational Program (*Pre-University course,* *Bachelor’s, Master’s,  Post-graduate, Internship, other*) and specialty that you would like to study | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 14. | How did you learn about FEFU? | | | | |  | | | | | | |
| 15. | Do you need a room in the dormitory? What type of room (*single, 2-person sharing*)? | | | | | | | | | | | |
|  |  | | | | | | | | | | | |
| 16. | Emergency person, telephone, e-mail | | | | | |  | | | | | |
|  |  | | | | | | | | | | | |

**VISA issued place (Country, city where a consular office of RF is located)\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I have read the Rules of the Federal Migration Service and I agree to observe these Rules (timely execution and extension of registration, visa, passport, etc.)**

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_