



**2019-2020 Academic Year**

## APPLICATION FOR ADMISSION (UAP COURSE)

This application and supporting documents become the property of IFNUL. **Cancellations:** All cancellations must be made in writing to the university. For cancellations received less than two weeks before the commencement of the course no fees are refundable except at the IFNUL President discretion in the case of illness or emergencies.

### Liability:

A student is liable to pay any damage to the university property, whether intentional or not. The Dean reserves the right to exclude from class any student who is restricting the class's progress because of poor attendance or bad behaviour. The same conditions are valid for students lodging in a student dormitory.

## PERSONAL INFORMATION AND MAILING ADDRESS

Last Name <input type="text"/>		<input type="text"/> Please attach a recent photo
First and Middle Names <input type="text"/>		
Date of birth <input type="text"/>	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Nationality <input type="text"/>	Passport No. <input type="text"/>	
Permanent Home Address:		
Street <input type="text"/>	City <input type="text"/>	Zip/Country <input type="text"/>
Telephone <input type="text"/>	Fax <input type="text"/>	E-mail <input type="text"/>
Name and address of a person to be contacted in emergency		
<input type="text"/>		
Telephone <input type="text"/>	Fax <input type="text"/>	E-mail <input type="text"/>
Family Status: <input type="checkbox"/> Single <input type="checkbox"/> Married		



## SELECTION OF COURSES

<b>Check your field:</b>			
Arts <input type="checkbox"/>	Humanities <input type="checkbox"/>	Sciences <input type="checkbox"/>	Engineering <input type="checkbox"/>
Full course <input type="checkbox"/>			
Faculty you wish to enter after preparatory course	<input type="text"/>		

## Enrollment

Desired enrollment date (year, month)	<input type="text"/>
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## Foreign language proficiency

Indicate the foreign language proficiency level			
Language	Beginner	Intermediate	Advanced
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**NOTE: Application must be signed and dated below in order to be valid.**

I certify that the information in this application is true and complete to the best of my knowledge. I understand that inaccurate information may affect my enrollment. Further, I will abide by its rules and regulations.

### Documents enclosed:

- 1. Certificate for Education and Transcript of Records
- 2. Application Form
- 3. Passport ID

**NOTE: After approval of your application, Certificate for Education and Transcript of Records must be translated into the Ukrainian and notarized by the Ukrainian Embassy in your country**

Applicant's Signature

Date