**APPLICATION FORM FOR INTERNATIONAL STUDENTS**

**PERSONAL DATA (Please type or print in English)**

|  |  |
| --- | --- |
| **Family name** |  |
| **First name** |  |
| **Patronymic name** |  |
| **Sex** | □ male □ female |
| **Date of Birth** |  |
| **Country of birth and place of birth (city, region)** |  |
| **Country of Citizenship** |  |

**CONTACT INFORMATION**

|  |  |
| --- | --- |
| **Mailing address**  |  |
| **Permanent home address**  |  |
| **Telephone number (cell phone)** |  |
| **E-mail** |  |
| **Contact person for emergency**  |  |
| **Telephone number for emergency** |  |

**INFROMATION ABOUT THE VISIT AND VISA ISSUES**

|  |  |
| --- | --- |
| **Passport no.** |  |
| **Dates of passport** | **Issue \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Issuing authority\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Purpose of the visit to Russia** |  |
| **Previous visits to Russia** |  |
| **Do you have any health or physical disability?** | **□ yes □ no** **If yes, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Expected dates of** | **Arrival \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Departure\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Place of visa issue (city, country)** |  |

**I certify that the information in this application is complete and accurate, and I understand that submission of inaccurate information can be considered sufficient cause for termination of my visit in Kemerovo State University.**

 **Signature Date**

**I give Kemerovo State University my consent to process my personal data.**

 **Signature Date**