



Sumy State University
Department of International Education

APPLICATION FORM
for getting invitation for studies at Sumy State University

Information about applicant:

1. Surname _____
2. Name _____
3. Patronymic _____
4. Date of Birth (dd/mm/yyyy) _____
5. Nationality _____
6. Passport No: Series _____ № _____
7. Country of Permanent Residence _____
8. Contact Information:
Full Address of Residence _____
E-mail Address _____ Skype _____
9. Document about the previous education:
Name of the document about the previous education _____
_____ Series _____ № _____ Date of issue _____

Studies at Sumy State University:

1. Form of studies: full time part time distance
2. Language of studies: Ukrainian English
3. Speciality:

4. Educational Degree: Bachelor Master
5. In the case of studies at the Preparatory Faculty, choose the specialization:
 medical economic
 technical humanitarian
6. In the case of obtaining a postgraduate education, choose:
 Postgraduate Education Clinical Ordinatura Internship

Date (dd/mm/yyyy) _____

Signature _____