

赣南医学院外国留学生入学申请登记表

Application Form for Foreign Students to study in China in GMU

姓 Family Name		名/Given name		照片 Photo
国籍/Nationality		护照号/Passport No		
性别 Sex		婚否/Marital Status		
出生日期: 年 月 日 Date of birth: Y M D		出生地点/Place of Birth		
家庭住址和电话 Home Add.& Tel.				
最后学历/Highest Academic Degree Obtained/			职业/Occupation	
工作或学习单位/Last Institution / High School Name				
来华学习专业/Field of Study in China MBBS				
高中成绩 Level obtained in (10+2)				
父亲姓名职业/Name and profession of father/Guardian				
父亲联系方式/Father/Guardian Telephone and E mail				
母亲姓名职业/Name and profession of mother				
<p>入学申请 Application for admission</p> <p>I have read prospectus, standards of fees, rules and regulation for the foreign students and program schedule etc. of Gannan Medical University in detail. I am willing to abide by the rules and regulations of the university, and pay the fees according to the standards. Here by I apply for the admission in M.B.B.S.</p> <p style="text-align: right;">Signature of Applicant: 签 名:</p> <p>Note: (Please fill up the form with right information completely)</p>				