

APPLICATION FORM – POLISH LANGUAGE COURSE FOR CITIZENS OF UKRAINE STUDYING AT NCU OR WISHING TO STUDY AT NCU

(please complete using block letters)

NAME:		SURNAME:	
DATE OF BIRTH:		PLACE OF BIRTH:	
SEX: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>		FATHER'S NAME:	
CITIZENSHIP:		MOTHER'S NAME:	
PASSPORT NUMBER:	PASSPORT DATE OF ISSUE:	PASSPORT EXPIRY DATE:	
EDUCATION			
HIGH SCHOOL (NAME OF THE SCHOOL)			
If there is: HIGHER (NAME OF THE SCHOOL, FACULTY)			
ADDRESS OF RESIDENCE IN POLAND			
COUNTRY:		CITY:	
STREET:		HOUSE NO.:	POSTCODE:
E-MAIL:		TELEPHONE:	
DATE OF ENTRY INTO THE TERRITORY OF POLAND:			
KNOWLEDGE OF LANGUAGES:			
IF THERE IS: COURSE OF STUDY CONTINUED AT NCU ON THE BASIS OF TRANSFER			
IF NO: COURSE OF STUDY AT NCU WHICH THE APPLICANT INTENDS TO TAKE UP			
I declare that I know the rules of participation in Polish language courses and my health allows me to study.			
DATE:		SIGNATURE:	