

MONGOLIAN UNIVERSITY OF SCIENCE AND TECHNOLOGY

Photo 4.5 x 3.5 mm

APPLICATION FORM

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	Personal	l II	ntn	rm	atı	Λn

1.1 Full Name First name Last name Middle name				
2 Gender •	Male	• Female		
3 Date & Place of Bi	rth			
Year Mo	onth D	Pay City	Province	Country
.4 Nationality & Citi	zenship			
,	F			
.5 Religion				
.6 Marital Status				
□ v · ·	Г	¬a		
• Married	•[Single • D	vivorced	
.7 Mailing Address				
.8 Permanent Addre	ss (if different)			
	Mobile: (+)	Home tel: (+)	
	1/1001101 (1	,	1101110 1011 (1	
.9 E-mail address				
.10 Emergency conta	ct			
Full Name:				
Relationship to app	icant:			
Address:				
	36.1.1	» (±)	Home tel: (±)	

	Year	Name of t	the Institute	Courses
imary Education	£			
	from			
	to			
chnical/Vocational Ed	lucation from			
	to			
gher Education	from			
	to			
Relationship to a	applicant			
Address				
Address	Miller		Warrant 1 (
Address	Mobile: (+)	Home tel: (+	-)
Address Mongolian Langu)	Home tel: (+	-) / Check
Mongolian Langu		Good	Home tel: (+	
Mongolian Langu	age Proficiency			
Mongolian Langu Listening Reading	age Proficiency			
Mongolian Langu	age Proficiency			
Mongolian Langu Listening Reading	Excellent			

Doctorate

5.2 Field of Study

STATEMENTS ON THIS FORM ARE TRUE AND COMPLETE	
Applicant Signature	Date

VISA:

International Applicant MUST apply for category "S" STUDENT VISA in order to study in Mongolia.

HEALTH INSURANCE:

Health Insurance must be covered by the applicant or student.

The completed application must be accompanied with required documents in English. Translations must be submitted with the original version of the documents if another language is used.