Photo

**International Student Application Form**

**1. Personal details**

**1. Family name**...........................................................................................................................................................................................

**2. Given names:** ........................................................................................................................................................................................

**3. Order of names:** ..................................................................................................................................................................................

**4. Date of birth** (DD/MM/YYYY): ……………………………………………………………………..................................................................……….

**5. Gender:**

Male

s

Female

**6. Citizenship:** ..............................................................................................................................................................................................

**7. Country of current residence**...........................................................................................................................................................

**2. Passport Information**

**1. Passport Number** …………………………………………………………………………………………………………………………………………………………………………………………………………………………..

**2. Issuing Authority** ……………………………………………………………………………………………………………………………………………………………………………………………………………………………

**3. Date of Issue** (DD/MM/YYYY) …………………………………………………………………**4. Expiration Date (**DD/MM/YYYY) ……………………………………………………………………….

**3. Applicant Contact Details**

**1. Phone:** ..................................................................................................... **2. Mobile(s):** ................................................................................................................................................

**3. Email:** ............................................................................................. ….. **4. Alternative number/Email:**…….......................................................................................................

**5. Contact Person** ………………………………………………………………………………..……....................................................................................................................................................................

**6. Applicant’s permanent address outside Georgia:** ...............................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................Post/zip code: ........................................................................Country:………..........................................................................................................................................................................................................

**7. Applicant’s mailing address (if different from above):**

............................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................................ Post/zip code: ........................................................................Country:………........................................................................................................................................................................................................

**4. Program Commencement**

Please tick the box next to the program and semester that you are applying for:

***Bachelor in Business Administration program in English***

Fall Semester (October 2021)

Spring Semester (March 2022)

**5. Language Proficiency**

**1. Native language** …………………………………………………………………………………………………………………………………………………………………

**2. Other languages**

………………………………………………………… FLUENTGOODFAIRPOOR

………………………………………………………… FLUENTGOODFAIRPOOR

**3**. **Knowledge of Georgian language**NONEBASICPOORFAIR

**4.**How do you intend to demonstrate that you have met English language proficiency requirements for the program applied?

**TOEFL**

Indicate your registration number and test date……………………………......................…………………………………..………………

**IELTS**

Indicate the IELTS Test Report Form (TRF) number………………….......................……………………………………..………………….

**University Test**

I choose to take to take English Proficiency Test in University upon arrival

**6. Academic Background**

**Please listallsecondaryandpost-secondaryprogramsinwhichyouhave beenenrolled:**

**I**

Course/award..........................................................................................................................................................................

Institution...................................................................................................................................................................................

Country .....................................................Year started ................................Year completed..........................................

**II**

Course/award..........................................................................................................................................................................

Institution...................................................................................................................................................................................

Country .....................................................Year started ................................Year completed.........................................

**Areyoucurrentlystudying?**

No

Yes*If‘Yes’,pleaseprovidedetailsbelow.*

Course/ ……….................................................................................................................................................................

Institution........................................................................................................................................................................

Country .............................................Year started ..............................Date results expected............................

**Do you wish to claim credit recognition on the basis of your previous study?**

 No

 Yes

**7. Declaration and signature**

**I agree:**

•TotheUniversitycommunicatewithmeviaelectronicmeans;

•TopermittheUniversitytoobtainmyacademicresultsfromotherinstitutions

**Iunderstandthat:**

•SubmitteddocumentssupportingthisapplicationbecomethepropertyoftheUniversityandwillnotbereturnedtome;

•TheUniversitymayvaryorcancelanydecisionitmakesiftheinformationIhavegivenisincorrectorincomplete;

•Informationiscollectedonthisformandduringmyenrolmentis toensurestudentcompliancewiththeconditionsoftheirvisasandtheirobligationsunderGeorgian Legislation

•Informationcollectedaboutmeonthisformandduringmyenrolmentcanbeprovided,incertain circumstances,totheGeorgianGovernmentanddesignated authoritiesandcanbedisclosedwithoutmyconsentwhereauthorizedorrequiredbylaw.

**I declare, that the information I have given in this application is correct and complete.**

If my application is accepted I undertake to observe university regulations and to ensure payment of fees and other liabilities

**Applicant’s signature**: ...............................................................................................................................................................**Date:** ....................................................

**Annexes**

Please provide list of all documents attached

1. ..........................................................................................................................................................................................................................; ..........................pages
2. ..........................................................................................................................................................................................................................; ..........................pages
3. ..........................................................................................................................................................................................................................; ..........................pages
4. ..........................................................................................................................................................................................................................; ..........................pages
5. ..........................................................................................................................................................................................................................; ..........................pages
6. ..........................................................................................................................................................................................................................; ..........................pages
7. ..........................................................................................................................................................................................................................; ..........................pages

Submit your completed application form and documentation to email:

**registration in admisions office**

Registered in Georgian National University SEU on

\_\_ / \_\_\_/ \_\_\_\_\_\_

DD / MM / YYYY

Registration Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Or to authorized representative:

Please indicate in email field “subject” as follows:

“**Application for** | *program name* | **from** | *your full name* |”