华中科技大学留学申请表

APPLICATION FOR STUDYING IN HUST

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| --- | --- | --- | --- |
| 姓氏**/Family Name** | 名字**/Given Names** | 性别**/Gender****□**男**/Male □**女**/Female** | **相片/Photo** |
| 国籍**/Nationality** | 宗教信仰/ **Religion:** | 婚姻状况**/Marital Status****□**已婚**/Married □**未婚**/Single** |
| 护照号码**/Passport No.:** | 护照有效期**/Valid until:** \_\_\_\_\_\_\_\_\_年/ **Yr** \_\_\_\_\_\_月/ **Mon** \_\_\_\_\_\_\_日/ **Day** |
| 出生日期：年 月 日 **Date of Birth: Year Mon Day** | 出生地点**/Place of Birth:**国家/**Country** 城市/**City**  |
| 家庭地址**/ Home Address:** | 电话**/Tel:**传真**/Fax:**电子邮箱**/E-mail:** |
| 最后学历**/ Education level:****Undergraduate** | 目前所在学校或机构**/Place of study or work：****Saarland University - Homburg, Germany** |
| 汉语水平**/Chinese Proficiency:** **□**零起点**/Zero □**初级**/Beginner □**中级**/Intermediate □**高级**/ Advanced**  |
| 申请类别**/ X** 本科生**/Undergraduate □** 语言生**/Chinese Language Student****Student Category: □** 硕士生**/Master’s Candidate □** 普通进修生**/General Scholar****□** 博士生**/Doctoral Candidate □** 高级进修生**/Senior Scholar** |
| 申请学习专业**/Major or field of study: Medicine**学习语言/**Teaching Language: English**  |
| 学习期限**/Duration:** 自**/From** 年**/Year** 月**/Month** 至**/To** 年**/Year** 月**/Month**汉语学习期限/Duration for Chinese language **□**一学期**/1 semester** **□**一学年**/1 academic year** **□**其他**/Other**  |
| 推荐人/**Recommended by:** 联系电话**/Contact number:** |
| 录取通知书邮寄地址/**Address for admission correspondence**Mr. Wolfgang HEINTZ, International Office, Saarland University, w.heintz@io.uni-saarland.de |
| 申请人在递送本申请表的同时，请提交/Please send with this form:1.语言进修生所需材料Relative documents required for Chinese Language applicants:护照复印件/One photocopy of your passport2.学位生及非语言进修生所需材料Relative documents required for Degree and Scholar applicants:1. 护照复印件/One photocopy of your passport
2. 最后学历证明/An official certificate of your highest education (or notarized photocopy)
3. 学习成绩单/An official transcripts (or notarized photocopy)
4. 学习计划/ Study plan (for postgraduate)
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| 1.上述各项中所提供的情况是真实无误的**.** All the information I provided above is true and correct;2.在校学习期间遵守中国政府的法规和学校的规章和制度**.** I shall abide by the laws of the Chinese Government and the regulations of the University. 申请人签字**/Applicant’s signature** 日期**/Date**  |
| **联系我们/Contact us: International Student Office****中国 湖北省 武汉市 430074 Huazhong University of Science & Technology****华中科技大学留学生办公室 Wuhan, Hubei Province 430074, P. R. China****网址/Website:** [**http://www.hust.edu.cn**](http://www.hust.edu.cn) **电话/Tel.: 0086-27-87542457****电子邮箱/Email:** **xjj@hust.edu.cn** **传真/Fax: 0086-27-87547833** |