

Foto

To the Rector
of Osh State University

APPLICATION

Registration № _____

Please allow me to take entrance exams on **the budget basis with no payment of tuition fees / contract basis with the payment of tuition fees.**

Faculty _____

by specialty _____

Form of study: full-time / part-time / evening

Language of study: Kyrgyz/Russian/English

My personal information:

Surname: _____

Name: _____ **Middle name:** _____

Date of birth: day , month , year **Gender:** Male / Female

Nationality: _____

Place of birth: province: _____ district: _____ village _____

Information about previous graduated institution: (School/Professional school/Higher education)

Name of the Institution: _____ Year of graduation:

Certificate/diploma series № Foreign language _____

Location: _____

Home address:

Citizenship _____ Province _____

District _____ City/Village _____

Street, house № _____ Telephone _____

Passport:

Series /№ _____

Date of issue: _____

Place of issue: _____

Military ID/Attached:

Series /№ _____

Date of issue: _____

Place of issue: _____

Information about parents:

Father: _____

Work place, position _____ telephone _____

Mother: _____

Work place, position _____ telephone _____

Home address of parents _____

I am informed about the rules for admission and the institution's license on undertaking educational activity.

Date of application submission “___” _____ **2020** **Signature of the applicant** _____

Receipt № _____ Date: _____