



Directorate of International Affairs
Admission Board of International Students

Application Form of Non-Iranian Applicants

A) Personal Information

First Name:		
Last Name:		
Father's Name:		
National ID Number:		
Date of Birth (Month/Day/Year)		
Birth Place(City/Country)		
Nationality:		Citizenship:
Religion:	Gender	Male <input type="checkbox"/>
		Female <input type="checkbox"/>
Marital Status:	Single <input type="checkbox"/>	
	Married <input type="checkbox"/>	Number of Children <input type="checkbox"/>
Passport Details:		
Passport No:		
Date of Issue:		
Date of Expiry:		
Place of Issue: (City/Country)		



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B) Educational Background

Degree	Field of Study	Start Date	End date	Grade Point Average	School / University	City	Country
High School Diploma							
B.Sc.							
M.Sc.							

C) Field of Study and the Applied for Degree (In order of Preference)

---	Major(s) you apply for
1	
2	
3	

D) Address and Phone Number of the Applicant

Country:
State/Province:
City:
Street:
Phone Number:
Cell phone:
Email:



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E) Address and phone number of friends and next of kin who live in Iran to contact them if needed

First and Last Name	Relation	Phone Number	Address

Iraqi applicants must select one of the cities where they can obtain their students visa from the Embassy or General Consulate of I.R. Iran.

Baghdad Najaf Karbala Sulaymaniyah Erbil

I hereby confirm that filling out the present form does not represent my admission at Kurdistan University of Medical Sciences.

I confirm to have completed all the required information correctly and in detail. If admitted at Kurdistan University of Medical Sciences, I will be committed to follow all the regulations of the University.

Name of the Applicant:

Signature: