

Kurdistan University of Medical Sciences
Admission Board of non-Iranian Students
Non-Iranian Application Form at Kurdistan University of Medical Sciences

A) Personal Information

First Name:		
Last Name:		
Father's Name:		
Birth Certificate 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)		

B) Educational Background

Degree	Field of Study	Start Date	End date	Average	Name of The Institution	City	Country
Diploma							
B.Sc.							
M.Sc.							

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

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---	The field of study you apply for
1	
2	
3	

D) How is the tuition fee provided?

Via Scholarship

Via Personal Income

The copy of scholarship confirmation which has been confirmed by the embassy or consulate of Islamic Republic of Iran in the country of applicant is required.

E) Address and Phone Number of the Applicant

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

F) 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

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

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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: