

# APPLICATION FORM

20\_\_ / 20\_\_ SESSION

## ABOUT THE PROGRAM OF YOUR INTEREST

Degree program: Bachelor's  Master's  Postgraduate

Specialty / Field of study: \_\_\_\_\_

1st alternative: \_\_\_\_\_

2nd alternative: \_\_\_\_\_

Mode of Study: Online  Offline  Not yet decided

## ABOUT THE APPLICANT

Full Name: \_\_\_\_\_

Surname

Name

Middle name

Gender: male  female  other  Marital Status: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ Nationality: \_\_\_\_\_

National passport No.: \_\_\_\_\_ Date of Issue: \_\_\_\_\_ Date of Expire: \_\_\_\_\_

Permanent Address: \_\_\_\_\_  
(Country, city/town, street, house No)

Contact Number: \_\_\_\_\_ Contact E-mail: \_\_\_\_\_

Country of application for Maltese visa (if needed) \_\_\_\_\_

## PREVIOUS EDUCATION

School name: \_\_\_\_\_

School address: \_\_\_\_\_

Attended Since \_\_\_\_\_ till \_\_\_\_\_ Received Certificate: \_\_\_\_\_

## COLLEGE / UNIVERSITY (if any)

College / University (if attended) name: \_\_\_\_\_

College / University address: \_\_\_\_\_

Attended Since \_\_\_\_\_ till \_\_\_\_\_ Received Certificate: \_\_\_\_\_

Have you ever studied in Malta before? Yes  No  If «Yes» specify the year, course, and university name

Have you ever studied Malta language? Yes  No  If «Yes» when and where

## APPLICANT SHOULD ATTACH THE FOLLOWING DOCUMENTS

1. Copy of passport      2. Copies of educational certificates      3. Transcript from previous educational institution (if any)

I confirm that the information given in the form is correct.

DATE \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_