



APPLICATION FORM

for study in the following accredited programmes in English:
“General Medicine” or “Dental Medicine” at the Faculty of Medicine
of the University Pavol Jozef Safarik in Kosice
for the academic year 20... / 20...

PERSONAL DATA

Given name:

Last name:

Birth name:

Academic degree:

Citizenship:

Email for communication:

Phone:

Date of birth:

Gender:

Family status:

Married Single Divorced Widower/Widow Not specified Partner

ADDITIONAL DATA

Applicant's country of birth:

Applicant's birthplace:

Father's given name:

Father's last name:

Father's birth name:

Mother's given name:

Mother's last name:

Mother's birth name:

*Les informations recueillies sur ce formulaire sont enregistrées dans un fichier informatisé par **Parcours médecin** pour la **gestion du recrutement**. Elles sont conservées pendant **1 an** et sont destinées **aux universités européennes**. Conformément à la loi « **informatique et libertés** », vous pouvez exercer votre droit d'accès aux données vous concernant et les faire rectifier en contactant : **parcours médecin**, contact@parcoursmedecin.com. Nous vous informons de l'existence de la liste d'opposition au démarchage téléphonique « **Bloctel** », sur laquelle vous pouvez vous inscrire ici : <https://conso.bloctel.fr/>*



APPLICATION FORM ADDRESS OF PERMANENT RESIDENCE

Country:

Street and street number:

ZIP (postal code) :

City:

COMPLETED STUDIES

Kind of secondary school:

Achieved education level:

- J-Full secondary general education at grammar school
- K-Full secondary vocational education received by graduating in educational programs with graduation where pupils receive also certificate of apprenticeship
- L-Full secondary vocational education received by graduating in educational programs with graduation
- M-Full secondary vocational education received by graduating in educational programs with graduation, except programs included in K
- N-Postgraduate qualification study and postgraduate innovatory study, postgraduate improvement
- Q-Higher vocational education received by graduating in educational programs of higher vocational school, conservatory and dance conservatory; postgraduate specializing study
- X-education completed at a foreign school

Date of school-leaving exam:

Year of finishing:

ATTENDED UNIVERSITIES

Country:

University:

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APPLICATION FORM

Faculty:

Achieved education level:

- P: University education achieved by completing professionally oriented bachelor study programs of universities
- R: University education achieved by completing bachelor study programs of universities
- S: University education achieved by completing master's study programs of universities
- T: University education achieved by completing master's study programs of universities after receiving a bachelor degree
- U: University education of II.degree with rigorous exam
- V: University education achieved by completing doctoral study programs of universities, postgraduate studies and scientific education
- X: education completed at a foreign school

Commencement of study (date):

The end of the study (date):

Final exam date (date):

Achieved degree (title):