



Academic Consulting OOD

Student Registration Card

Please, fill in the Registration Card. The required data will be kept in confidence.

Date:.....

Name:..... Gender:.....

Home address:..... Date/place of birth:.....
..... /dd/mm/yy/
.....

Telephone:..... Nationality:.....

Email:

Name and location of the academic institution you are attending.....
.....
.....

Level of admission:

Major:

Desired field of study:

1.
2.
3.

Preferred country:.....

Major

- Bachelor Master Doctorate
 Other.....



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Date of intended enrollment

September January June Year.....

Expected amount of annual support toward your education:

- Less than 5 000 USD/ Euro
- From 5 000 to 10 000 USD/ Euro
- More than 10 000 USD/ Euro

Sources of funds for your study (family savings, sponsors, loans, etc.).....
.....
.....

Standardized tests

DateTOEFLScore

DateSAT IScore

DateSAT IIScore

DateGREScore

DateGMATScore

DateScore



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Name and location of the academic institution you will attend or wish to attend:.....
.....
.....
.....
.....

Activities(sport, public services, voluntary services, dance, etc.).....
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.....

Work experience:.....
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Have you ever been abroad:.....
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Languages learned, certificates:.....
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.....
.....

Family information

Mother's name:.....
Occupation:.....



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Title:.....
Telephone..... Email:

Father's name:.....
Occupation:.....
Title:.....
Telephone..... Email:

Do you have brothers or sisters?.....
.....
.....

How did you learn about the existence of the service?

- Recommended by someone;
- Posters, advertisements;
- Web page;
- Other, please specify.....

Would you recommend using the Advising Service to someone interested in studying abroad?
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Thank you for your time! Wish you luck in the application process!