

## Six-Year Dual Medical Degree Program Application Form



## 六年制双医学学位 申请表

	Academic Ye	ar:			
First name 42					
riist name 名子		Photo Passport size			
Gender 性別	'				
Date of Birth 出生日期/yy /mm /dd	Religion 宗教信仰				
Place of Birth 出生地 Mari	ital Status 婚姻状况				
Permanent Address 永久地址: Street 街道					
City 城市 State 州	Country 国家	Zip Code 邮	递区号		
Permanent (Family) Phone 连络电话 Mobile 手机					
Address for correspondence (or temporary) 通讯地址	Ŀ:				
e-mail:					
Passport Information 护照信息					
Passport Number 护照号码	Date of Issue 发照日期	/yy	/mm	/dd	
passport issued by (country) 发照国家	Date of Expiry 到期日	/yy	/mm	/dd	
Family Information 家庭信息					
Father 's Name	Date of Birth				
父親名字	出生日期	/yy	/mm	/dd	
Mother's Names	Date of Birth				
母親名字	出生日期	/yy	/mm	/dd	
Other Guardian's names	Date of Birth				
其他监护人的名字	出生日期	/yy	/mm	/dd	

Education Background 学习经历 From Elementary School 从小学开始填写, Institutions 学校名称, Years attended 在校时间, Field of study 主修专业								
Language proficiency 语言能力								
English 英语	TOEIC (score):	TOEFL (	score):	IELTS (score):				
Chinese 汉语	☐ Good ☐ Average [	None	Polish 波兰语	☐ Good ☐ Average ☐ None				
Other Languag	es 其他语言 							
Work experience 工作经历(Employer 工作单位, Years attended (from/to) 起止时间):								
Other activities or comments regarding the application 其他相关活动证明								
Financial Support 经费来源 Who is going to pay the University fee during your study? (Relationship with the applicant) 谁会在你的学习期间支付学费?(与申请人的关系)								
If by grant/loan, please state the name of authority and address. 如有助学金或贷款,请注明贷款机构及地址。								



## Six-Year Dual Medical Degree Program Application Form

六年制双医学学位 申请表



Hav	e you b	en sub	jected to disciplinary acti	on by any college, been convinced of a criminal						
offe	ense, or	do you l	have any criminal or disc	iplinary charges pending?						
你有	没有被任何	J大学的纪		· · · · · · · · · · · · · · · · · · ·						
	No [	Yes	If yes, please describe	in detail in an enclosed letter. 如果是,请以书信详述。						
I he	ereby aff	rm that	: 申请人保证							
1.	1. All information and materials provided are factually true and correct. I understand that I									
	may be	subject	to a range of possible di	sciplinary actions, including admission revocation						
	or expu	lsion, s	hould the information I've	e certified be false.						
	上述各项ロ	填写的信息	息和提供的材料真实无误。 如因个人	信息错误、失真造成不良后果,责任由本人承担。						
2.	. During my study in China, I shall observe the rules and regulations of the university, and									
	will concentrate on my studies and researches, and will follow the teaching programs									
	provide	d by the	e university.							
	在学期间	遵守学校的	的校纪校规,尊重学校的教学安排							
3.	During	my stay	in China and Poland, I sl	hall abide by the laws and decrees of the Chinese						
	or Polis	h gover	rnment, and will not partic	cipate in any activities which are deemed to be						
	advers	to the	social order in China & P	oland, and are inappropriate to the capacity as a						
	studen	•								
	在中国及波兰就读期间,遵守中国及波兰的法律和法规,不从事任何危害中国及波兰社会秩序的,与本人中国及波兰学习身份不相									
	符合的活动	J								
Арр	olicant's	Signatu	ıre	Date						
申请人签名			日期							
** T	he applic	ntion is in	valid without the signature 无原	<i>比签名,申请无效</i>						
		•	•	f not supported by governmental finances						
	•			nmitments of the applicant.						
		、持个是以	府机关单位,而是从你的父母, <u>"</u>	至护人,及配偶(財務支持人).且你的财务支持人接受并承担申请人						
的财	务承诺									
Fin	ancial S	onsors	s Signature							
財務	支持人簽名	, i								
Dat	е		Place							
日期			地黑占							

<sup>\*\*</sup> The application is invalid without the signature 无此签名,申请无效