

# 华北煤炭医大学

North China Coal Medical University

## APPLICATION FORM FOR FOREIGNERS WISHING TO STUDY

由申请人用中文或英文填写

To be completed by the applicant in Chinese or English



1. 护照用名/Full legal name SADIQ MUSTAFA  
姓/SURNAME 名/FIRST MIDDLE

2. 中文姓名/Chinese name \_\_\_\_\_  
姓/SURNAME 名/FIRST

3. 国籍/Country of citizenship PAKISTAN 4. 婚姻状况/Marital status SINGLE

5. 宗教信仰 Religion ISLAM 6. 性别/Gender  男/Male  女/Female

7. 护照号码及种类/Passport No. & Type \_\_\_\_\_ 8. 出生日期(年/月/日)/Date of birth(y/m/d) 88 / 9 / 21

9. 出生地点/Place of birth PAKISTAN (州/省/STATE/PROVINCE, 国家/COUNTRY)

10. 永久通讯地址/Permanent home address H.NO. 281 SECTOR F/3 PART I MIRPUR  
AZAD KASHMIR 传真/FAX \_\_\_\_\_ 电话/TELEPHONE 058610 - 32662

11. 目前通讯地址/Current mailing address if different from permanent address \_\_\_\_\_

传真/FAX \_\_\_\_\_ 电话/TELEPHONE \_\_\_\_\_ 电子邮件/E-MAIL ISHTI-420@YAHOO.COM

12. 来华留学类别 / Categories of foreign students

- 1) 攻读学位/Degree Program  本科生 BA. BS  硕士生 M. A. /M. S.  
2) 不攻读学位/Non-Degree Program  语言生 Language Student  普通进修生 General Scholar Student  
 高级进修生 Senior Scholar Student  研究学者 Research Scholar

13. 申请专业/ Field of study Medicine

14. 学习期限/Duration of Study  
自/from \_\_\_\_\_ 年/year \_\_\_\_\_ 月/month 至/to \_\_\_\_\_ 年/year \_\_\_\_\_ 月/month

15. 本人学历(从高中开始)/Educational Background (Starting from high school)

校名/Name	地点/Location	时间/Dates attended	专业/Major	所获学位/Degree Obtained
<u>KASHMIR MODEL COLLEGE</u>	<u>MIRPUR (AK)</u>	<u>2004</u>	<u>SCIENCE</u>	<u>SSC</u>
<u>KASHMIR MODEL COLLEGE</u>	<u>MIRPUR (AK)</u>	<u>2006</u>	<u>PRE-MEDICAL</u>	<u>HSSC</u>

16. 本人工作经历(从当前工作开始)/Work Experience (Starting from current position)

工作单位/Employer 地点/Location 时间/Dates attended 职位/Position