**Application Form for International students**

Part I

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PERSONAL DETAILS** | | | | | | | | |
| 1 | Family name | | |  | | | | |
| 2 | Given names | | |  | | | | |
| 3 | Date of birth | | |  | | | | |
| 4 | Gender | | |  | | | | |
| 5 | Citizenship | | |  | | | | |
| 6 | Country of birth | | |  | | | | |
| 7 | Country of current residence | | |  | | | | |
| * You must give your family name(s) and given name(s) as shown on your passport; * If your name appears differently, we will reserve the right to amend it on our records; * If emailing a copy of your passport to, please send this as a separate attachment to the rest of your application. Please also give the order in which you want your names to appear on your offer letter and Confirmation of Enrolment. | | | | | | | | |
| **APPLICANT CONTACT DETAILS** | | | | | | | | |
| 8 | Phone |  | | | | | | |
| 9 | Mobile |  | | | | | | |
| 10 | Email (Mandatory) |  | | | | | | |
| **Applicant’s permanent address outside Georgia** | | | | | | | | |
| 11 |  | | | | | | | |
| 12 | Post/zip code |  | | | | | | |
| 13 | Country |  | | | | | | |
| **Applicant’s mailing address (if different from above)** | | | | | | | | |
| 14 |  | | | | | | | |
| 15 | Post/zip code |  | | | | | | |
| 16 | Country |  | | | | | | |
| A permanent address outside of Georgia must be given, as well as any different mailing address. This is required as part of the proof that you satisfy the requirements of being an International student. This cannot be a PO Box address. | | | | | | | | |
| **Academic Background** | | | | | | | | |
| **General (Secondary) Education** | | | | | | | | |
| Name and Location of Institution | | |  | | | | | |
| Starting Date | | |  | | | | | |
|  | | | | | | | | |
| **Higher Education**  *To be completed if student has already completed the studies or is requesting the transfer from another university.* | | | | | | | | |
| Name and Location of Institution | | |  | | | | | |
| Course/Degree | | |  | | | | | |
| Duration in years | | |  | | | | | |
| Starting Date | | |  | | | | | |
| Date of Accomplishment | | |  | | | | | |
|  | | |  | | | | | |
| Are you currently studying? | | | YES NO | | | | | |
| If your answer is “Yes” please provide details. | | | | | | | | |
| Name and Location of Institution | | |  | | | | | |
| Course/Degree | | |  | | | | | |
| Starting Date | | |  | | | | | |
| Do you wish to claim credit on the basis of your previous study? | | | | | | | YES NO | |
| * Your application will only be assessed if it is accompanied by certified copies of academic transcripts for all of the courses you have undertaken to date; * Applicants who want to apply for credit recognition on the basis of previous study must apply for formal recognition of previous study period to the National Center of Educational Quality Enhancement of Georgia; * Credit may only be considered once you have provided an official statement of recognition of the Educational document/study period; * Application for credit are assessed on a case-by-case basis and the application process may take longer if you apply for credit; * Credits and exemptions will be recorded on your official academic transcript and once granted credit and exemptions cannot be rescinded or remove. | | | | | | | | |
| **Name of the program that you are applying for** | | | | | | | | |
| **………………………………………………………** | | | | | | | | |
| **Language Proficiency** | | | | | | | | |
| **English: (A-highest, B,C,D, E-basic)** | | | | |  | | | |
| **Duration of study (years)** | | | | |  | | | |
| **Certificate/confirmation available** | | | | | YES NO | | | |
| **Declaration and Signature** | | | | | | | | |
| **I agree:**   * to The University communicating with me via electronic means * to permit the University to obtain my academic results from other institutions | | | | | | | | YES  NO |
| **I understand that:**   * submitted documents supporting this application become the property of the University and will not be returned to me * the University may vary or cancel any decision it makes if the information I have given is incorrect or incomplete * information is collected on this form and during my enrolment is to ensure student compliance with the conditions of their visas and their obligations under Georgian Legislation * Information collected about me on this form and during my enrolment can be provided, in certain circumstances, to the Georgian Government and designated authorities and, can be disclosed without my consent where authorized or required by law | | | | | | | | YES  NO |
| **I declare that the information I have given in this application is correct and complete.** | | | | | | | | |
| **Applicant’s signature**  **………………………………………………………………** | | | | | | **Date**  **………………………………………………………………** | | |

Part II

|  |  |  |  |
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| **Annexes** | | | |
| **N** | **Document** | **Pages N** | **Condition**  (Translated/Notarized) |
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To prevent any unnecessary delays in the processing of your application, it is essential that you read and follow all instructions before sending your application to the University.

Submit your completed application form and documentation to Tbilisi Humanitarian Teaching University or to University’s authorized representative.

**Name of Intermediary institution(s)/Agent(s) supporting your application:**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | | |
| Phone |  | E-Mail |  |