

APPLICATION FORM

for the study programme Medical Studies in English Language

*The application form should be readable, filled in with capital letters, and signed.***Personal details:**

First name:	
Surname:	
Date of birth:	
Place of birth:	
ID (passport) number:	

Information on permanent place of residence:

Country:	
City:	
Municipality:	
Canton:	
Address (street and number):	
Contact telephone:	
E-mail:	

Please mark enclosed documents:

1. Application Form
2. Proof of administration tax payment in the amount of 100.00 BAM
3. Original transcript (of each secondary/high school year) and secondary/high school diploma or a court translation of documents if a process of nostrification/equivalence by the Federal Ministry of Education and Science is not finished by the submission deadline.
4. Proof of English language knowledge (Proof of an internationally recognised English language proficiency test (e.g. TOEFL) or certificates issued by official language school (C1 level). Certificates of English language proficiency issued by a secondary/high school are also accepted.
5. Birth certificate (original or notarised/verified copy)
6. Citizenship certificate/Passport copy or other legal document to verify citizenship
7. Other relevant documents (e.g. awards, prizes, etc.)

Application date:	Signature:
-------------------	------------