 川北医学院国际教育交流学院

 School of International Education and Cooperation

留学生申请表Application Form for International Students

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| Roll Number学号 |  | Batch年级 |  |
| English Name英文名 |  | Nationality国籍 |  |
| Chinese Name中文名 |  | Passport Number护照号 |  |
| Telephone联系电话 |  | Email邮箱地址 |  |
| Content of application申请内容 |  |
| Reason for application 申请理由 Applicant申请者：Date日期： |
| Approval of Office/SAO/TAO办公室/学生/教务科意见 |  |
| Approval of SIEC国交院意见 |  |