



# **NATIONAL UNIVERSITY OF MONGOLIA**

## **APPLICATION FORM FOR INTERNATIONAL STUDENTS (Semester Program)**

**Application Fee: U\$20 (non-refundable)**

Photo

### **1. Personal details**

Family Name: \_\_\_\_\_ Given Name (s): \_\_\_\_\_

Sex (Male/Female): \_\_\_\_\_ Date of Birth (Day/Month/Year) \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Passport No: \_\_\_\_\_ Native language: \_\_\_\_\_

Current Address: \_\_\_\_\_

Telephone (Work): \_\_\_\_\_ (Home): \_\_\_\_\_

Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: .....

Emergency address and phone number in your country \_\_\_\_\_

Location of Mongolian Mission where you intend to apply for your Student Visa: \_\_\_\_\_

### **2. Programme Preferences**

Preferred semester: \_\_\_\_\_ (September /February) \_\_\_\_\_ (Year)

Preferred programme: \_\_\_\_\_ (E.g., Mongolian  
Language Programme)

### **3. Study plan**

#### 4. Educational background

Institution and Place	Year (From-To)	Field of Study	Degree Conferred

#### 5. Language proficiency

Language you studied	Length of study	Speaking	Writing	Reading

**Ability:**    *A: Good    B: Fair    C: Poor    D: Very poor*

#### 6. Checklist

I have included in this application form

- ☐ A copy of your passport;
- ☐ A copy of certificate/diploma of education (translated into English, Russian, or Mongolian);
- ☐ Two passport-size photos;
- ☐ Complete medical form including HIV test.

#### 7. Declaration

I declare that the information provided in this application is correct and true.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Send your complete application to:**

Office for International Affairs  
National University of Mongolia  
P. O. Box 46A/523  
210646 Ulaanbaatar  
Mongolia

If there is any question about your application form, please do not hesitate to contact us by email:  
[int\\_rel@num.edu.mn](mailto:int_rel@num.edu.mn)