**UMAP PROGRAM C (SSTP): Student Application Form**

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| **PERSONAL INFORMATION (Please type)**  Name: (Surname) (Given Name)  Passport No.:  Date and Place of Issue:  **Please attach a scanned copy of your passport photo page.** | Photo  4 X 5 cm  (optional) |
| College / University: |
| Major:  Year: | |
| Gender: male / female Date of Birth: dd/mm/yyyy | |
| Mailing Address: | |
| Phone Number (mobile): | |
| E-mail: | |
| **EMERGENCY CONTACT (Please type):**  Name:  Phone Number:  Address  Relationship to you: | |
| Date of Application： | |

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| **Top 3 Programs of Your Choice:**  **(Names of University,**  **and names of program, 1 as the most desired)** | 1. (University) |
| (Program) |
| 1. (University) |
| (Program) |
| 1. (University) |
| (Program) |