**广西中医药大学logo3 广西中医药大学外国留学生入学申请表**

**APPLICATION FORM FOR FOREIGN STUDENT**

Doc. No.

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| --- | --- | --- | --- |
| 学生类别  Categories of Student | 🞏 本科生Undergraduate Student 🞏 硕士研究生 Master Candidate 🞏 博士研究生 Doctoral Candidate  🞏 语言生Language Student 🞏 普通进修生 Visiting Student Candidate 🞏 交换生Exchange Student | | |
| 申请学习时间  Duration of Study | 年 月 日 至 年 月 日  From( YY/MM/DD) to | 学习专业  Field of Study |  |

个人基本信息：Personal Data

|  |  |  |  |
| --- | --- | --- | --- |
| 姓氏  Family Name | 名字  Given Name | | 照片  Photo |
| 中文姓名  Chinese Name | 性别  Gender | 出生日期  Date of Birth(YY/MM/DD) |
| 国籍/地区  Nationality | 民族  National Minority | 出生地点  Place of Birth |
| 护照号码  Passport No. | 是否华裔  Ethnic Chinese(Yes/No) | |
| 宗教  Religion | 特长、爱好  Hobby or Interest | |
| 婚姻状况  Marital Status | 语言  Language | 职业  occupation |
| 永久联系电话  Permanent Contact Tel. | | 电子邮件  E-mail | |
| 永久联系地址  Permanent Contact Address | | | |
| 当前联系电话  Present Contact Tel. | | 当前联系电邮  Present Contact E-mail | |
| 其他联系方式  Other ways of contact | | | |

亲属情况及在华事务联系人：Family Members & Contact in China

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 配偶姓名  Spouse’s Name |  | | 配偶年龄  Spouse’s Age |  | | 配偶职业  Spouse’s Career |  |
| 联系电话Contact Tel. |  | | 联系地址Contact Address |  | | 电子邮件  E-mail |  |
| 父亲姓名  Father’s Name |  | | 父亲年龄  Father’s Age |  | | 父亲职业  Father’s Career |  |
| 联系电话Contact Tel. |  | | 联系地址Contact Address |  | | 电子邮件  E-mail |  |
| 母亲姓名  Mother’s Name |  | | 母亲年龄  Mother’s Age |  | | 母亲职业  Mother’s Career |  |
| 联系电话Contact Tel. |  | | 联系地址Contact Address |  | | 电子邮件  E-mail |  |
| 在华紧急情况联系人  Contact in Case  of Emergency in China | |  | | 关系  Relationship |  | 联系电话Contact Tel. |  |
| 电邮  E-mail |  | | | 其他联系方式  Other ways of contact | |  | |
| 推荐人或机构信息Reference Person/Organization | | | | | | | |
| 推荐人/机构  Reference Person |  | | | 电邮  E-mail | |  | |
| 电话Tel |  | | | 传真Fax | |  | |
| 地址Address |  | | | | | | |

受教育情况：Education Background

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 学校  School Name | 在校时间  Duration of Study | 主修专业  Fields of Study | 所获文凭/学位  Diploma/Degree | 是否有汉语课程  Chinese Course Included  (Yes/No) |
|  |  |  |  |  |
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|  |  |  |  |  |

汉语情况：Chinese Proficiency

|  |  |
| --- | --- |
| 是否学过汉语  Have you learned Chinese before (Yes/No) | 学过多长时间 \_\_\_\_年\_\_\_\_个月  Duration of Learning Chinese \_\_\_\_Years \_\_\_\_Monthes |
| 是否获得汉语水平考试证书  Have you gotten HSK certificate (Yes/No) | 汉语水平  Chinese Proficiency |
| 是否曾在中国其他院校就读？ 🞏 无 🞎 是 请写出曾就读学校名称。  Have you ever been admitted to any Chinese university/college? Please indicate the name(s) of the university(s) | |

健康状况：Health Status

|  |
| --- |
| 过去是否患有下列病史：  Have you ever had any of the following diseases or disorders endangering the public order and security?  🞎 无  有以下  🞏 毒物瘾 Toxicomania 🞏 精神病Psychosis 🞏 高血压 Hypertension 🞏 心脏病 Heart Diseases 🞏 糖尿病 Diabetes  🞏 肝炎 Hepatitis 或其他需要提前告知的疾病 Other diseases need to be informed in advance |

**申请人保证/I hereby affirm that:**

**1.上述各项中填写的信息和提供的材料真实无误，通讯地址、联系电话及Email地址准确、有效。因信息错误、不清楚或材料内容虚假造成的不良后果，责任由本人承担。**

**All information and materials given in this form are true and correct. I will take the consequences for providing incorrect or invalid information. I will bear all serious consequences due to incorrect or invalid mailing address, phone number or e-mail address.**

**2.在华期间，遵守中国的法律、法规，尊重中华民族的文化和风俗，不从事任何危害中国社会秩序的，与本人学习身份不相符合的活动。遵守校纪校规，服从学校的教育教学安排。**

**During my study in China, I shall abide by the laws and decrees of the Chinese government, as well as respect the cultures and customs of China. I will not participate in any activities in China which are deemed to be adverse to the social order of China and inappropriate to the capacity as a student. I shall abide by the rules and regulations of the host university, and follow the teaching programs arranged by the university.**

**3.本人身体健康符合在华学习标准，如健康状况不能达到在华学习标准，需回国治疗并达到标准后再返回学习；**

**My health status meet with the standard required to study in China, if not, I shall return to my home country to receive treatment until reaching the standard before I get back to study.**

**4.按规定期限修完学业，按期回国，不无故在华滞留；**

**I shall return to my home country as soon as I complete my scheduled program in China, and will not extend my stay without valid reasons.**

**5.如违反上述保证将接受中国法律、法规或学校校纪、校规的惩处。**

**If I am judged by the Chinese laws and decrees and rules and regulations of Guangxi University of Chinese medicine as having violated any of the above, I will not lodge any appeal against the decisions of the relevant authority.**

申请人签字/Signature of the applicant:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_日期/Date:\_\_\_\_\_\_\_\_\_\_\_\_

(无此签名，申请无效/The application is invalid without the applicant’s signature)

注意事项/Important Note:

申请表须用中文或英文印刷体填写，其他文字或缺项填写的申请表无效。每个表格项目均为必填项，如某个项目确实无可填写内容的，可填“无”，不可留空。

This form is to be completed by the applicant in Chinese or English only. An incomplete application or completed in languages other than Chinese or English is invalid.

中国广西南宁市明秀东路179号广西中医药大学

Guangxi University of Chinese Medicine, No.179, Mingxiu Dong Road, Nanning, Guangxi, P. R. CHINA 530001

Tel: +86-771-3148091 Fax: +86-771-3135812 E-mail: [fiegxtcmu@126.com](mailto:fiegxtcmu@126.com) website: fie.gxtcmu.edu.cn