**

*do not fill in the blank*

|  |
| --- |
| Student ID number: |

**REGISTRATION - till 03 February, 2021**

1. ***Address***

|  |  |
| --- | --- |
| Student name |  |
| Country |  |
| City |  |
| Street and house number |  |
| Postal code |  |
| Telephone number |  |
| E-mail adress |  |

|  |  |
| --- | --- |
| Gender (male/female) |  |
| Nationality |  |
| Native country  |  |
| Place of birth  |  |
| Date of birth  |  |

1. ***Personal data***

|  |
| --- |
| Signature Date |

***I here by also declare that I will participate on the full of program.***

***Please send this form to:***

*isamuradov@azmiu.edu.az*