

Wroclaw School of Information Technology @

Candidate questionnaire for Graduate (Master's degree) studies
(Please PRINT or use BLOCK LETTERS)

Part A

1. Home address:

SURNAME	FIRST NAME	SECOND NAME
STREET	APT. NUMBER	ZIP CODE
VILLAGE / TOWN / CITY	STATE / PROVINCE	COUNTRY
MOTHER'S SURNAME	FATHER'S FIRST NAME	MOTHER'S FIRST NAME
SEX	PASSPORT NUMBER	DATE OF BIRTH
M [] F []		

2. Contact data:

EMAIL	PHONE NUMBER

3. Type of undergraduate degree obtained:

1. Bachelor of Arts [] 3. Bachelor of Engineering []
2. Bachelor of Science [] 4. Other (please specify):

Full name of the college/university:

Graduation date:

Part B

1. For the academic year / I select the following study program:

Informatics []

Bioinformatics []

2. For the academic year / I select:

Full-time (stationary) studies [] Part-time (non-stationary) studies []