



Date of receipt

Registration Number

CANDIDATE APPLICATION FORM

First year enrolment for: **full-time programme** **part-time programme**

Qualification: **Degree in Tourism and Leisure**

Programmes and courses: *(please check one)*

Travel Services Tourism Management International Tourism Hospitality and Catering

1. Surname: Names:

2. Date of birth: *(dd/mm/yyyy)* Place of birth:

3. Father's name: Mother's name:

4. Permanent address:

5. Correspondence address: *(if other than above)*

6. Home tel.: Mobile:

7. E-mail:

8. ID/Passport No. :

9. Marital status: Nationality: Citizenship

10. I completed secondary education:
School name:

Locality: Year of completion:

11. Occupation:
Workplace in Poland: Tel. at work:

12. Who needs to be notified in case of accident *(name, address, tel no.)*

13. How did you find out about the School: Newsletter Informatory leaflets Internet WSTiJO student
 Press Tourism trade fair Friends and acquaintances

STATEMENT

I certify that the facts set forth above are true and correct.
I agree to the use of my personal details as disclosed herein for the purpose of this form and undertake to inform the School office in writing of any change thereof. I consent that should I fail to inform the School of my change of correspondence address, all communications sent to the one disclosed in this form shall be deemed effectively delivered.
With my signature, I certify that the information I gave in this questionnaire is true and correct.

Warsaw, the

Candidate's signature

Admission Requirements

LP	LIST OF ATTACHED DOCUMENTS	CANDIDATE DOCUMENTS SUBMISSION ACKNOWLEDGEMENT	ACKNOWLEDGEMENT OF RECEIPT OF DOCUMENTS
1	notarised secondary school certificate or an official duplicate issued by the candidate's secondary school; completed application form		
2	4 passport-size photographs		
3	copy of candidate's ID/passport		
4	certificate of English language proficiency (unless the secondary school courses were taught in English)		
5	medical certificate clearing the candidate to study abroad (no medical or psychiatric contraindications to participate in courses)		
6	admission fee payment receipt : Bank details: Bank Gospodarstwa Krajowego Nr 53 1130 1017 0020 0983 5920 0001 or Bank Millennium SA Nr 37 1160 2202 0000 0000 4029 5587		

Application deadline 30 June 2011

Foreign languages:

WE PROVIDE	FULL-TIME STUDIES	PART-TIME STUDIES
courses in Polish as a first foreign language	YES	YES
courses in either of the following languages, as selected by the student:	German <input type="checkbox"/> Spanish <input type="checkbox"/>	German <input type="checkbox"/> Spanish <input type="checkbox"/>

Charges and fees

FEES	FULL-TIME STUDIES	PART-TIME STUDIES
Registration fee	400 USD	400 USD
Tuition fee (annual)	3.350 USD	2.950 USD

WSTiJO will register the candidates for admission subject to payment of registration fee and one annual fee. The student shall be required to take out health and life insurance. The annual cost of health insurance is approx. EUR 120.

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Vice-Chancellor's signature

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Student's signature