

ONLINE APPLICATION FORM FOR THE FACULTY OF MEDICINE

To be filled in by the candidates from the European Union, the European Economic Area

and the Swiss Confederation

JULY SESSION 2021

FILLING IN THE ONLINE APPLICATION FORM DOES NOT AUTOMATICALLY QUALIFY A CANDIDATE FOR THE COMPETITIVE ENTRANCE EXAM UNLESS THE CANDIDATE SUBMITS A COMPLETE FILE, WITH ALL THE REQUESTED DOCUMENTS, IN PDF. FORM, AT THE E-MAIL <u>international@umft.ro</u>

PLEASE FILL THIS FORM IN CAPITAL LETTERS ONLY!

Nr. crt.	Fields	Data	Observation			
Sect	Section I.1 – Personal information					
1	Family name at birth (the surname written in the birth certificate)					
	Current family name, as it is written in the candidate's identity card /passport (changed after marriage, adoption, on request, if applicable, according to the certifying document)					
3	First name/s as it is written in the birth certificate					
	First name/s as it is written in the identity card /passport					
4	Father's complete surname and first name					
4.1	Father's initials (first letter of the father's first name)					
	Mother's complete surname and first name					
5.1.	Mother's initials (first letter of the mother's first name)					
	Personal identification number/any other personal identification code or number					
	Date of birth (day, month, year)					
	Place of birth (country and town/county/village)					

9	Gender		
	Marital status		
	(married, unmarried, divorced, widow)		
	Citizenship (according to the current passport)		You can apply only on the basis of a single citizenship!
	Current address (country and town/county/village and complete address – street, number, apartment, etc)		
13	Identity card /Passport	Series	if applicable
		Number	
		Issued by the country	
		Date of issue	
		Expires on	
14	Contact information of the	Phone (including the country prefix)	
	candidate	E-mail	
	Existing disabilities /Particular medical situation		if applicable and only if the medical situation can be supported by official documents!
Sect	ion I.2. The candidate's educa	ational background (high-school/college g	graduate)
1	school/college)	Country	
		Town/County/Village	
		Duration of studies	
		Year of graduation	
2			Name of the study document (based on the list of recognized diplomas, according to Annex 5 from the Admission requirements)
		Series	if applicable
		Number	
		Issued by the country	
		Date of issue	
		Number of transcript of record	if applicable
3	The average obtained at the final graduation exam (high-		

	school/college) / equivalent						
exam / national exam Section I.3. Language requirements							
Language certificate for the applied study program, supported by official documents		YES NO e following information is necessary:					
1	The name/ type of language certificate (according to the list with the accepted language certificates specified in the Admission requirements / the certificate of graduation of the preparatory year / language certificate issued by the institutions accredited by the ME/Romanian study documents related to study programs in Romanian / study documents / transcripts of records attesting at least 4 consecutive years of studies followed in Romanian						
2	Issued by the country		_				
3	Name of issuing institution						
4	Number						
5	Series		if applicable				
6	Issued on						
7	Expires on		if applicable				
8	The level of language proficiency		B2, C1, C2				
Section I.4. The candidate's option							
1	Faculty and study program	Medicine –Medicine in English; Medicine in French)					
2	The chosen study program and language of study (please order your options within the SAME FACULTY, according to your preferences)	1. 2.	You can only choose the study programs within the same faculty, as specified in the Admission requirements				

The undersigned hereby declare that all the information given above is true and I give my consent to processing of my personal data.

I have read and understood the information contained in the Admission Requirements 2021 and the related annexes.

DATE_____