



**NATIONAL AEROSPACE UNIVERSITY**  
**Kharkiv Aviation Institute(KhAI)**  
**Application Form for Registration of the Invitation for**  
**Students from Other Countries**  
**(Undergraduate and Graduate International Students)**

Please attach a recent photograph in this space (Only if you send the form by fax, you can send without a photograph)

*For Office Use Only*

Data:

**NOTE:** Please fill the Application form after reading it carefully. Please send us the copies of educational certificates, passport with filled Application form by Email or Fax. You can get our Application form from website or from any of Our Representatives listed in our website [www.khai.com.ua](http://www.khai.com.ua). Please send us the documents at [admissions@khai.com.ua](mailto:admissions@khai.com.ua) or [dean@khai.com.ua](mailto:dean@khai.com.ua) or by fax: **+380-577-190472**.

**Return to:** Department of International Relations (DIR) of National Aerospace University "KhAI", 17, Chkalov street, Kharkiv, 61070, Ukraine

**A PERSONAL DETAILS**

**NAME:** (Write your full legal name, without abbreviation, as it appears on such official documents as school records, test scores, passport, etc.)

Family (last) name	First name	Middle name
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Other family names which might appear on documents	<input type="checkbox"/>	<input type="checkbox"/>	Day	-	Month	-	Year
	Male	Female			Date of birth		
	Sex						

Citizen of what country?	Country of birth	Nationality	City, province, etc. Place of birth
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Passport No.  *I do not have foreign passport, since it will be made out after reception of the invitation*

**Degrees already received (the completed)**

<input type="checkbox"/> Secondary education	<input type="checkbox"/> Bachelor	<input type="checkbox"/> Specialist
<input type="checkbox"/> Master	<input type="checkbox"/> Ph.D.	<input type="checkbox"/> Other _____

**Intended major field of study at the university**

**Degree sought**  Bachelor  Specialist  Master  Ph.D.

**CONTACT ADDRESS (HOME)**

Number and street name	City/Suburb
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Province or State	Zip or Postal Code	Country
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Telephone

Fax

Country Code	Area Code	Local number
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E-mail

**VISA STATES**

Citizenship: _____  Do you have a visa? <input type="checkbox"/> Yes <input type="checkbox"/> No  If not, what form do you require to obtain one?	Citizen/visa (fill in only one) <input type="checkbox"/> F-1 Student (in Ukraine code "O") <input type="checkbox"/> Ukraine Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Other: _____	<b>If you have the visa that offered the place of registration and reception of visa (Embassy, Country, City)</b>
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**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_