

Send this form to all the institutions where you want to be enrolled. Please write legibly using a typewriter or CAPITAL letters

CPR-number (ddmmyy)

1. Personal data

Reserved for the institution	First name(s)		Phone number
	Family name		Mobile phone number
	Address		
	Country code	Postal code	City
	Country		E-Mail

2. Citizenship

<input type="checkbox"/> Danish	<input type="checkbox"/> Other:	Country code	Country
Do you have a Danish residence permit? If yes please enclose a copy of the permit <input type="checkbox"/> Yes <input type="checkbox"/> No			

3. Application for admission to

Name of institution		Name of programme	Admission area no.
Standby <input type="checkbox"/> If I am not admitted to this programme, I apply for standby	Postponement of study start <input type="checkbox"/>	Line of study, training location or practical training location if applicable	

4. Higher secondary education/Entry qualification

Name of entry qualification	
Name of institution	
Grade point average from your secondary school	Year

6. Order of priority

Priority	Admission area no.	Programme
1		
2		
3		
4		
5		
6		
7		
8		

5. Current or previous enrolment on higher education programmes, if applicable

Higher education programmes where you are or have been enrolled but have not completed the programme	Number of programmes:
<input type="checkbox"/> I already hold a post-graduate degree (Second cycle higher education degree)	

Documentation

It is essential for the processing of your application that you submit correct and complete documentation. Do not submit original documents, but send verified photocopies. The names and addresses of the witnesses and date of signing must be given on each copy – stating that the copy corresponds with the original. Two impartial witnesses, who are not closely related to the applicant, must verify each copy. Former schools or other relevant official authorities may also verify the copies. If there is not enough space for all the information on the application form you may enclose it on a separate sheet.

Signature

I certify that the information given in this application is complete and accurate	
_____	_____
Date	Signature of applicant

Admission area no.					
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CPR-number (ddmmyy)										-				
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7. Post-secondary education

Please state exams, study periods etc. from higher education.
Official transcripts must be included.

	Name of degree	Name of institution	Start (date)	End (date)
1.				
2.				
3.				
4.				

8. Examinations passed supplementary to the higher secondary education/entry qualification

	Name of course	Name of institution	Start (ddmmyyyy)	End (ddmmyyyy)
1.				
2.				
3.				
4.				
5.				
6.				

9. Work experience

Documentation from the employer is required.

	Employer	Nature of work	Start (date)	End (date)	Hours weekly	Total Number of Months
1.						
2.						
3.						
4.						
5.						
6.						

10. Extra-Curricular activities

	Institution/Organisation	Nature of activity	Start (date)	End (date)	Hours weekly	Total Number of Months
1.						
2.						
3.						
4.						

11. Residence outside your home country including former periods of residence in Denmark

Documentation is required

A. Former periods of residence in Denmark		Purpose of stay	Start (ddmmyy)	End (ddmmyy)
1.				
2.				
3.				
B. Other Countries		Purpose of stay	Start (ddmmyy)	End (ddmmyy)
4.				
5.				
6.				
7.				

12. Knowledge of Danish Language

Documentation is required

Name of language test you have passed or registered for	Yes	No	Date of language test
Study Test in Danish as a Second Language (Studieproven i dansk som andetsprog)			
Other:			
Other:			

13. Knowledge of English Language

Documentation is required

Name of language test you have passed or registered for	Yes	No	Date of language test
TOEFL			
IELTS			
Cambridge Proficiency Certificate			
Other:			
Other:			

Signature

Under liability according to Danish Law, I hereby declare the information I have given to be truthful and accurate.

Date

Signature of applicant