

## **Registration and Declaration**

First name:	last name:
Citizenship:	Passport number:
E-mail:	
Mobile Number:	
I am registering for the entranc	e exam on the following date and I am aware of the exam fee (mark the box):
$\square$ 22-23 April Tel Aviv (re	egistration deadline April 15 <sup>th</sup> ) - exam fee 250\$
$\square$ 10-11 May Tel Aviv (re	egistration deadline May 3 <sup>rd</sup> ) - exam fee 250\$
$\Box$ 17-18 June Tel Aviv (r	egistration deadline May 31st ) – exam fee 250\$
☐ 9-10 July Tel Aviv (re	gistration deadline May 31st ) - exam fee 250\$
Other location - Place	: Date:
Semmelwise University  Szeged University  Pecs university	universities and I am aware of the application fee (Mark the box):  versity Application fee (for 2 exams): 350 \$ □ Physiotherapy, Nursing 450 €  y Application fee: (for 2 exams) 300 €  Application fee (for 2 exams): 200 \$  rsity Application fee (for 2 exams): 200 €
I declare and aware of the fo	ollowing (please check all):
☐ On each exam limited	d places; your seat will be reserved after completing this form.
☐ All application and €	exam fees are nonrefundable after payment.
☐ Application fee is pa	aid to the university <b>before the exam</b> and the regestration deadline.
☐ I can change the exa	am date up to 14 working days prior to the actual exam date which I signed for.
☐ The representative -	University International Studies- Israel, carries out my registration and application
I aware of the following	ng application fee to each university and exam fee.
☐ Online registration is	needed to each university I apply for with the following documents:
Secondary School Leavin	Di di
<ul><li>Curriculum Vitae in Englis</li><li>Motivation letter</li></ul>	• Health Certificate
<ul> <li>Photograph. One passpor</li> </ul>	
<ul> <li>Copy of Passport</li> </ul>	For Pecs University:
<ul> <li>1 or 2 Recommendation L</li> </ul>	_etters
You can download forms her	re: www.uis.co.il/page/36   All documents must send to: info@uis.co.i
Signa	ature Date