

A. PERSONAL DETAILS

Title	Mr.	Ms.	Dr.	Others:
Last name (Family name)				
Middle name				
First name (Given name)				
National identification number				
Father's name				
Date of birth (DOB)	Day:	Month:	Year:	
Place of birth (City)				
Country of origin				
Nationality				
Other nationalities	No	Yes, Please specify:		
Country of citizenship				
Religion				
Gender	Female	Male		
Marital status	Single	Married	No. of children (if any):	
Physical limitations	No	Yes, Please specify:		
Mother language				

Address for Correspondence

No. and Street Apt./Unit

City Province Country Postal Code

Country code: Area Code: Phone Number:

Home (Landline) Telephone **Mobile**

e-mail:

Alternative e-mail:

* Please note: Your email address will be used to be in contact with you, including for notification of your admission decision.

B. PASSPORT INFORMATION

Passport number		
Issuing authority		
Date of issue		
Date of expiry		
Place of issue (city/country)		
Have you ever been in Iran before?	Yes	No
If YES		
Last date of stay in Iran		
Length of stay in Iran		



C. ACADEMIC QUALIFICATIONS

Current Study

Degree	Field of study	Start Date	Approximate End Date	Name of University	City	Country

Previous Degrees

Degree	Field of study	Start Date	End Date	Class or Grade	Name of Institution/School/University	City	Country
Ph.D.							
Professional doctorate							
Master's degree							
Bachelor's degree							
Associate degree							
Diploma							
Others:							

Certified academic transcripts required.

D. COURSE PREFERENCES

Please specify the fields of study you are more likely to pursue. Click to see the available programs:

Professional doctorates	General medicine	Dentistry	Pharmacy
Fellowship			
Medical/Dental specialty			
Ph.D.			
MSc.	1		
(You can choose up to 3	2		
fields in order of priority)	3		

Preferred semester and year of commencement

1st Semester (September) Year:

2nd Semester (February) Year:

E. PUBLICATIONS (Book or Journal Articles)

If available, please list the citations (or links) to your publications.



F. LANGUAGE PROFICIENCY

I have a valid IELTS (Academic) or TOEFL English language test result.

No Yes, Final Score: _____ Date taken: _____
(Documentary evidence is required)

Please complete the table below according to your language skills.

Language	Speaking			Listening			Reading			Writing		
	Poor	Good	Excellent	Poor	Good	Excellent	Poor	Good	Excellent	Poor	Good	Excellent
Persian												
English												

* Your language proficiency will be assessed by the University Language Center on Interview session.

G. COMPUTER KNOWLEDGE

I have an International Computer Driving License (ICDL).

No Yes, Average Score: _____ Date taken: _____
(Documentary evidence is required)

Please state types of software applications you are familiar with.

* Your computer knowledge will be assessed on Interview session.

H. WORK EXPERIENCE (optional)

Please complete the table below with your most recent or current profession listed first.

Job position	Start Date	End Date	Name of Organization	City	Country

I. HONORS, AWARDS, and MEMBERSHIPS (optional)

Please list your honors, awards, and professional memberships, if applicable.

J. PATENTS (optional)

Please list your granted patents, if available.

* Documentary evidence is required for items H,I,J.



K. EMERGENCY CONTACTS

Please list below the contact information of your next of kin or friends **preferably** in I.R.Iran.

Full Name	Relationship	Phone Number	Permanent Address

L. TUITION FEE FUNDING

Please state how you intend to pay your tuition fees at SSU.

Scholarship*

Personal

* A receipt of the scholarship notification confirmed by the Embassy of Islamic Republic of Iran in the applicant's country is required.

M. INTERVIEW PREFERENCES

How would you like your interview session to be held?

Phone interview

Video interview

In-person interview

N. How did you find out about SSU? (optional)

We would be grateful if you could let us know how you found out about the University.

Visiting SSU

SSU representative

SSU alumni

Family/friends

SSU website

Other websites (please specify):

Others:

O. DECLARATION AND SIGNATURE

I declare that the information provided by me in this form is true, accurate, and complete.

I understand that completion of this form does not guarantee admission to SSU.

I understand that I am required to provide originals of any documents used to support this application.

I acknowledge that SSU reserves the right to decline my application in case of incomplete or false information.

If admitted, I declare that I will be able to abide by the rules and policies of Islamic Republic of Iran.

Applicant's Full Name: _____

Signature: _____

Date: _____

You will sign here personally
at the time of interview or
registration.

Thank you for your time. When completed please email this form to internationaloffice@ssu.ac.ir.