

APPLICATION FOR ADMISSION TO SINGLE SUBJECTS, DAYTIME AT THE FACULTIES OF NATURAL AND TECHNICAL SCIENCES

PLEASE WRITE in block letters

Personal data	Other nationalities than Dan	ish: Date of birth:		
	Danish citizens only:	CPR-number:		
First Name(s):				
Street name and number.:				
Post code.: City	<i>7</i> :	Country:		
Telephone number during the day: _			ur telefone number is unlisted \Box	
Occupation:				
Citizenship: \Box Danish	□ Other Country (Codes: Country:		
For citizens of countries outsi	de the EU or the EEA with a peri	nanent residence permit o	or a residence permit with the	
Have you been or are you presently e If yes, the name of the University	nrolled as a student at a Univers	ity Yes	□ No □	
Qualifying admission degree, di	ploma or certificate			
The full title of your foreign school and/or university degree/diploma/certificate:				
, s	<i>J G</i> 1			
I, the undersigned, hereby apply for a	admission to the following course	oc.		
i, the undersigned, hereby apply for a	dimssion to the following course	55.		
Department of				
Subjects:				
(Please give an exact title of the course and the STADS UVA CODE from the course catalogue http://kursuskatalog.au.dk/en/):				
1.				
2.				
3.				
Enclosures: The following documents	ntion must be enclosed the applic	cation form (cf. admission	requirements):	
- Applications for single sub	jects at bachelor level: Copy of th	ne original upper secondar	ry school leaving certificate	
	ects at Master's degree level: dip	-		
_	, for further information: http://	kandidat.au.dk/en/admi	ssion/admission-requirements/	
- Copy of your passport				
Applications lacking the relevant Please send the application to Continu international.au.dk/education/admissi	ing Education, Nat-Tech Educat	ion, through the form at t		
☐ I hereby declare that the univers requirements for the applied mo				
I hereby declare that the information	above is correct and complete.			
Date/month/year		Signatur	re	
2 att, 111011111/ Jeur		Digitatu	-	



Payment Information

Name:	Date of birth:
I will pay the participant's	fee myself
Employer will pay particip	pant's fee for the courses listed on the application form
Have made agreement wit	h job centre or municipality about payment
FILL IN ONLY IF EMPLOYER CVR no.	OR JOB CENTRE/MUNICIPALITY IS PAYING
Employer	
If necessary, department	
Address	
Postal code	
City	
Telephone number	
A CVR number must be stated a All registered companies in Den	as we cannot create an invoice without it. mark have a CVR number.
If a public institution or authori EAN number.	ty is paying, it must be by e-invoice. In that case we also need an
13 digit EAN number	
- for electronic invoicing If necessary, order number	
If necessary, person reference	
Tel. for payment questions	

If you have questions to the above, you are welcome to contact us via email: evu.nat-tech@au.dk. *Forward your application and the payment information* through the form at the webpage: https://international.au.dk/education/admissions/continuing-and-further-education/available-study-place-scheme/submit-application/

Continuing Education Nat-Tech Studies Aarhus University Ny Munkegade 120, building 1520 **8000 Aarhus C** Denmark