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Applie	Please affix your recent passport size photograph		
I. Applicant Information:			
Legal Name:			_
Date of Birth://] Year	_	
Gender: Male Female Others		Marital Status: Single Married	
Citizenship Country:		Place of Birth:	
Passport Number:			
II. Contact Information:			
Phone:			
Permanent Address:			
Line 1			
		Country	
Pin	Phone	Mobile	

1 Application for Admission Saint Teresa University



Tick if it's the same as the permanent address

Present Address:

Line 1		
Line 2		
City	_ State	Country
Pin	Phone	Mobile

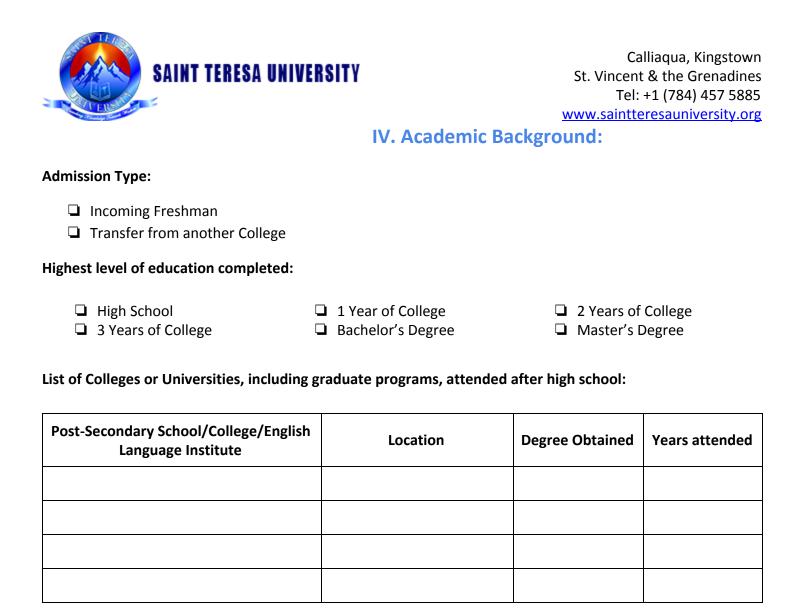
III. Degree Program:

Check one anticipated term start date for your program:

- Generation Winter, 20____
- Gring, 20
- □ Summer, 20___
- 🖵 Fall, 20 ___

Check one Degree program you wish to apply for:

 Doctor of Medicine Masters in Business Administration (MBA) Master of Science in Information Technology (MSIT) MBA - Corporate Excellence and Leadership MSc - Clinical Medicine MSc - Clinical Dentistry MSc - Yoga Masters Research in Yoga and Human Wellness 	 BSc - Medical Sciences BSc - Yoga Pre-Med
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If you took the IELTS, enter your score here: _____ If you took the TOEFL, enter your score here: _____

If you took the PTE, enter your score here: _____ If you took the MCAT, enter your score here: _____

If you took any entrance exams of other countries name it and enter your score: ______

I certify that all the information submitted throughout the admission process; including this application; specific documents for specific credential levels or supplemental/supporting materials is my own work and accurate to the best of my knowledge.

Signature: _____

Date (mm/dd/yy): _____

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