

Министерство культуры Российской Федерации

федеральное государственное образовательное учреждение высшего образования «Московская государственная академия хореографии»

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PERSONAL DATA FORM

Please, type or print clearly: Last name _Middle name____ First name Date of birth: " 20 Sex: male female ___ Mailing address: zip code _____ country ____ city _____ street ____ building _____ apartment____ Phone: ______e-mail: _____ _____ country ____ Permanent address: zip code _____ city ______ street _____ building _____ apartment____ Phone: _______e-mail: ______ Parents/ legal guardians of the STUDENT: Names: Phone: ______ e-mail: ______ Summary of academic background

Dates of attendance	Education (secondary and ballet) (name of school/college)	Degree (Certificate) obtained

Russian Language level:			
Elementary,	Basic (Waystage user)	, First (Threshold)	
Information for visa support:			
Citizenship	(if more than one, please indica	ate them using comas)
Permanently I live in	(country)		(region)
Place of birth	(country)		(city)
Russian Embassy/Consulate where you (city)	wish to obtain visa:		(country)
Name of school/college:			
Address:			
Phone:	Fax:		
Parents/guardians of a student: Names			
Contacts			
Position of a student in the Bolsh	noi Ballet Academy (trainees	hip program or full-time e	ducational program):
Proposed date of arrival to Moscow:	(day)	(month) (yea	r)
Please, send this application by e-mail:	mgah-bia@yandex.ru		
I declare that all above information is o			
on the tuition fee. I am prepared to time to the Bolshoi Ballet Academy I will of			

Date: _____ (day) ______ (month) _____ (year) **Signature** _____