



بِسْمِ اللَّهِ الرَّحْمَنِ الرَّحِيمِ

University of Medical Sciences & Technology

جامعة العلوم الطبية والتكنولوجيا

Application Form For Admission to University Academic Year (2011-2012)

Date of Application:

Name of Applicant:

Nationality:

Date of Birth:

Permanent Address:

.....

Telephone: Fax E-mail:.....

Name of Secondary School:

Place:

Secondary School Examination Date:

Type of certificate	Date of certificate

State result of Secondary School Certificate:

Subject	Percentage	Subject	Percentage
Biology		Arabic Language	
Chemistry		Special Arabic	
Physics		Islamic Studies	
Elementary Mathematics		Special Islamic Studies	
Additional Mathematics		Other	
English Language		Overall Percentage	

Desired Course of Study:

Contact Us:

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Fax: (+249) 83224799
Email: admission@umst-edu.org