



**REGISTRATION FORM**  
FOR STUDENT ENROLLMENT AT FACULTIES  
IN \_\_\_\_\_ / \_\_\_\_\_ YEAR

Registry number  
of the unique registry

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Enrolls in: 1. Winter Semester  
2. Summer Semester

Numerical  
of the unit in

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Name of Faculty or professional school \_\_\_\_\_

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Department \_\_\_\_\_

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Module \_\_\_\_\_

Study level (VII; VIII) \_\_\_\_\_

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School Street/No \_\_\_\_\_ Telephone \_\_\_\_\_

address City \_\_\_\_\_

Municipality \_\_\_\_\_

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Unique Master Citizen's \_\_\_\_\_

Number of the citizen (student enters this number from  
the ID – obligatory)

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Day

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Month

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Year

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remaining 6 digits  
from the UMCN

1	Surname, name of one parent and name		
2	Day, month and year of birth		
3	Sex		Male..... 1    Female..... 2
4	Place of birth	City	
		Municipality	
		Country	
5	Permanent residence	City	
		Municipality	
		Country	
6	Citizenship		
7	Nationality		
8	Prior education and where it was completed	Name of school	
		Specialty	
		GPA	
		Language of instruction	
		Year studies were completed Name of the country where the education was completed	
9	Year of study you are enrolling in (circle the applicable number)		I    II    III    IV    V    VI
10	Mode of study		full time ..... 1    part time ..... 2
11	Study fee payment method		in cash ..... on credit .....
12	Study fee (amount in MKD)		
13	Have you previously enrolled in the same year of study?		Yes .....    No .....

14	What academic year did you first enroll at this type of school (in the 1st Semester)?			
15	Occupation of parent (guardian)			
	Occupation of student			
16	Social-economic status of the parent – guardian, i.e. the student (circle a single number next to the applicable option)			
	Parent – Guardian	Student		
	Worker	1	Worker	1
	Company owner /co-owner	2	Company owner /co-owner	2
	Owner/Co-owner of private shop with employees	3	Owner/Co-owner of private shop with employees	3
	Person who works independently or with the help of other household members	4	Person who works independently or with the help of other household members	4
	Helping household member	5	Helping household member	5
	Employed	6	Employed	6
	Person supported by a guardian	7	Person supported by a guardian	7
	Unemployed	8	Unemployed	8
	N/A	9	N/A	9
17	Level of education (circle a single number next to the applicable option)			
	Father	Mother		
	Higher Education	1	Higher Education	1
	Professional Studies	2	Professional Studies	2
	High School	3	High School	3
	Secondary School	4	Secondary School	4
	Other	5	Other	5
N/A	6	N/A	6	

I confirm the accuracy of the data filled in for questions 1-17 of this questionnaire

Responsible for the accurately and fully filled-in questionnaire

In \_\_\_\_\_ on \_\_\_\_\_ (date).

(M.P.)

(Full signature of the authorized person)