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Department

Application Form 2016 - 2017

Section 1: applicant's information



Full name according to your passport Series

School name Exam serial No.

Graduation year

Highschool certificate: Scientific Literary Commercial other

Other certification post-secondary school: Diploma Bachelor other

Is this your first time applying at KUST? Yes No

Section 2: highschool grades must be filled in by your highschool staff

Subject \ Grade										Total score
First term	grades in digits									
	grades in writing									
Second term	grades in digits									
	grades in writing									

Number of fails in 12th grade: None One year More than one year

High school headmaster must fill this section:
 Signature
 Name
 Date
 High school stamp
 We confirm the above information.

Local educational department must fill this section:
 Signature
 Name
 Date
 Educational department stamp
 We confirm the above information.

Section 3: Personal Information

1. Date of birth (mm/dd/yyyy): / / place of birth:
2. Gender: Male Female
3. Permanent address: City Area Quarter
 Street House number
4. Contact: Mobile phone number Landline phone number
 E-mail:
5. Marital status: Single Married Other
6. Civil ID card number Registration No. Place of issue
7. Iraqi citizenship card number Date & place of issue
8. Passport number (if available) Date & place of issue Expiry date
9. Name of sponsor:
Father full name Phone No. Job
Mother full name Phone No. Job
Husband/Wife full name Phone No. Job
10. Do you have any physical disabilities (handicap), (you can talk about this information freely and it will stay confidential This information will help the University to form studying flexibility for the student during his/ her studying period).
No Yes If your answer is yes, please checkin the box(es) below:
Eyesight impaired Hearing impaired Speaking problems Have disability
 In
Other (please give details)
11. Do you have any relations at komar university? if yes, write his/her name in the box
12. in order of preference, please write the college and department you want to major
First choice
Second choice
Third Choice

Note1: Applicants must return blood and eye test result with this form

Note2: Please be informed your choice to any department will be based on your high school GPA should you not be selected for your first choice, your second choice will be considered.

Pledge

I certify that the information provided above is true and I am aware that any mistake or misleading information will deem my proposal and prompt my dismissal from KUST. I agree to follow all policies and regulations issued by the Ministry of Higher Education and Scientific Research and University, and make required payments on time. Otherwise I will be held responsible to loss my rights as a student.

Applicant signature:

Date:

Address: Sarchinar-Qularaise District, Sulaymania City, Kurdistan Region- Iraq