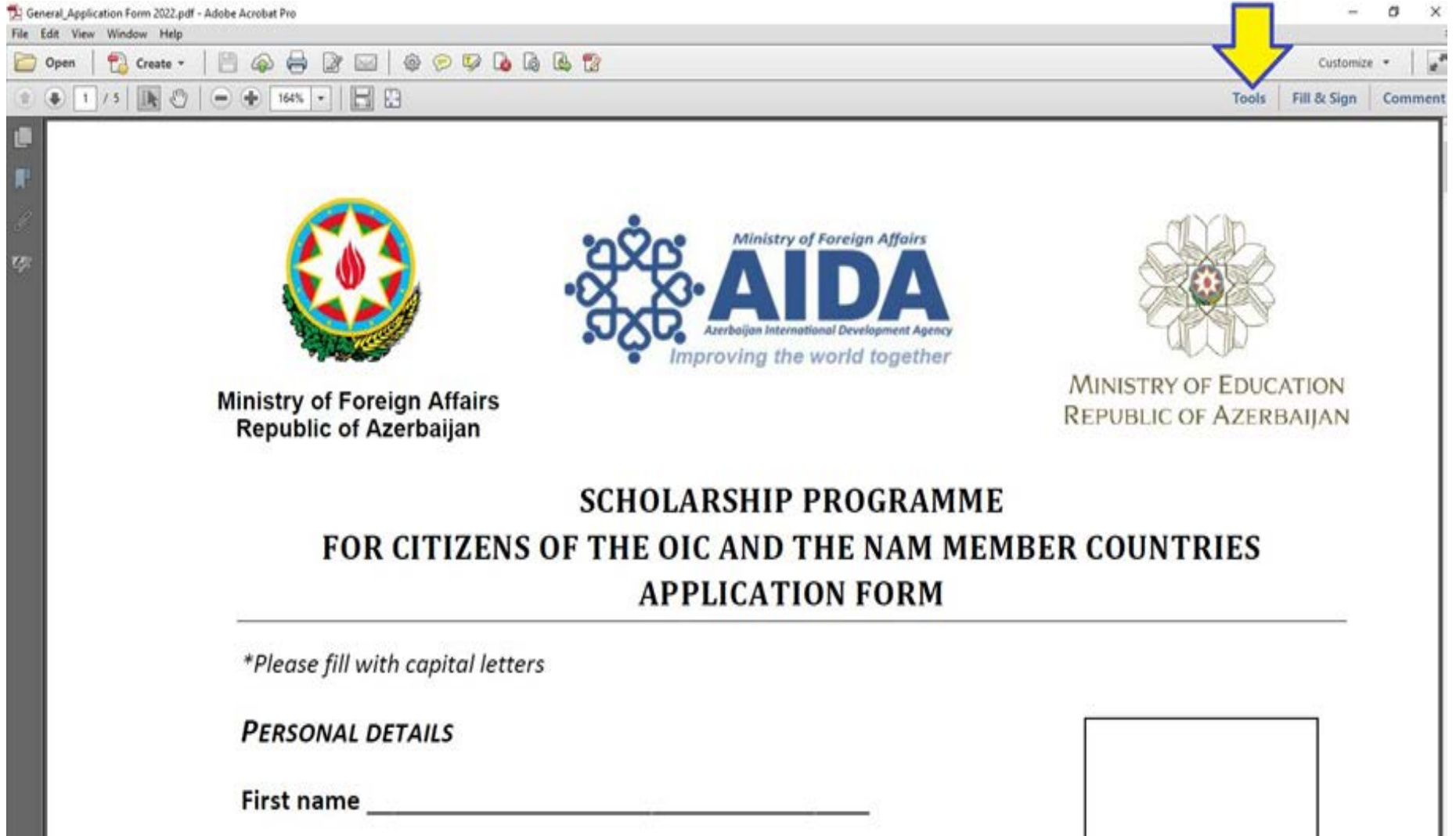


Instruction on how to fill the application using “Adobe Acrobat”

1. Open the file using “Adobe Acrobat” and click on the “Tools” command:





General_Application Form 2022.pdf - Adobe Acrobat Pro


File Edit View Window Help

Open Create [Icons] 1 / 5 164% [Icons]

Tools Fill & Sign Comment


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**SCHOLARSHIP PROGRAMME
FOR CITIZENS OF THE OIC AND THE NAM MEMBER COUNTRIES
APPLICATION FORM**

**Please fill with capital letters*

PERSONAL DETAILS

First name _____



2. To fill the application, choose the “Add text” section:


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SCHOLARSHIP PROGRAMME
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APPLICATION FORM

**Please fill with capital letters*

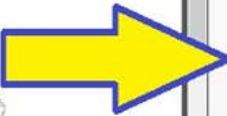
PERSONAL DETAILS

First name _____

Surname _____

Gender ☐ Male ☐ Female

PHOTO



Content Editing

- Edit Text & Images
- Add Text**
- Add Image
- Export File to...

More Content

- Add or Edit Link
- Add Bookmark
- Attach a File

Pages

Interactive Objects

Forms

Action Wizard

Text Recognition

Protection

3. To insert a photo, opt for the “Add Image” section or stick the photo manually when the application form is printed out:

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APPLICATION FORM**

**Please fill with capital letters*

PERSONAL DETAILS

First name _____

Surname _____

Gender ☐ Male ☐ Female

PHOTO



Content Editing

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- 4. After filling all the required spaces with the relevant information, print out the application form.**
- 5. As the final steps the applicant must sign the printed hard copy, attach his/her relevant photo & scan the for further processing.**



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**SCHOLARSHIP PROGRAMME
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APPLICATION FORM**

**Please fill with capital letters*

PERSONAL DETAILS

First name _____

Surname _____

Gender ☐ Male ☐ Female

Marital status ☐ Single ☐ Married ☐ Divorced ☐ Widowed

Date of birth _____ Citizenship _____
(dd/mm/yy)

Passport Number _____ Passport Expiration Date _____

PHOTO

CONTACT DETAILS

Home address _____

Current address (if different) _____

Home telephone number _____ Mobile phone number _____

Fax number _____ Email _____

Contact person in case of emergency

Name, Surname _____ Relationship to you _____

Telephone number _____ E-mail _____

ACADEMIC BACKGROUND

Please list all academic institutions you have attended and qualifications you have obtained (the most recent first)

Year	Institutions	Qualification	Subject	Language of study

PROFESSIONAL EXPERIENCE

Please list the institutions where you have worked (the most recent first)

Year	Institutions	Position

KNOWLEDGE OF LANGUAGES

Please list the languages you have proficiency (rate yourself as “excellent”, “good”, “fair” and indicate IELTS or TOEFL test score, if you have)

Language	Speaking	Reading	Writing	Test score (if available)

PROPOSED STUDY IN AZERBAIJAN

A. Which academic qualification would you like to obtain within current scholarship programme?

☐ Bachelor ☐ Master ☐ Doctoral ☐ General medicine/residency

B. Which subject would you like to study?

C. In which language would you like to study?

☐ Azerbaijani ☐ Russian ☐ English

D. Please prioritise three universities based on your preference at which you would like to study (refer to the attached list of universities).

1. _____

2. _____

3. _____

STATEMENT OF PURPOSE

Please reflect on your interest to study in Azerbaijan, your aspiration to obtain relevant academic qualification for your proposed subject and your future plans after successful accomplishment of this programme (no more than 500 words)

REFEREES

Please provide the names of two referees below who can evaluate your suitability for the program of study.

Name and surname	Institution and position	Contact details

CHECKLIST FOR APPLICATION PACKAGE

Please be sure that you have included the following items in your application package

- ☐ Completed application form
- ☐ Diplomas and transcripts from prior high school or university studies
- ☐ Curriculum Vitae (CV) or resume
- ☐ Copy of international passport
- ☐ Document on general health status (including HIV/AIDS test)
- ☐ Certificate on language proficiency (*if available*)

SIGNATURE

I confirm that the information provided in this form is accurate and correct to the best of my knowledge.

Signed _____

Date _____