



Confucius Institute at Cleveland State University 2016 年克利夫兰州立大学孔子学院体验中国暑期商务项目申请表

Application for 2016 Business Study Abroad in China Summer Program

名 First Name:	中间名 Middle Name:	姓 Famil	姓 Family Name / Last Name:		
中文姓名 Chinese Name:	性别 Gender	国籍 Na	国籍 Nationality:		
出生日期 Date of Birth: 年(Y) 月(M) 日(D)			出生地点 Country of Birth:		
电子邮件 E-mail Address:	护照号码 Passport No:		护照有效期 Passport Valid Until:		
			年/Y	月/M	日/D
所在学校 University/School name :					
最高学历 Highest Academic Degree Obtained:		学习专业 Major at Your University:			
永久联系地址 Permanent Home Address and Telephone No.					
街道 Street					
国家 Country邮编 ZIP code		_电话 Phone Nui	电话 Phone Number		_
家长或紧急联系人地址及联系方式 Parents'/Emergency Contact's Mailing Address:					
街道 Street	_城市 City	City			
国家 Country	『编 ZIP code				
姓名 Name 电i	舌 Phone Number	关系 Relation	nship		
姓名 Name 电ì	舌 Phone Number	关系 Relation	nship		

申请人在递送本申请表时请提交:

Applicant should submit the following documents with the application form:

- (1) 护照复印件 Photocopy of passport photo page
- (2) 报名费: 200 美元 Registration Fee: \$200, checks payable to **The CSU Foundation**, memo: **Confucius Institute Study Abroad + Applicants' name**
- (3) 教授推荐信 Recommendation letter from a professor
- (4) 非正式成绩单 Unofficial transcript

Please send the application form and registration check to:

Confucius Institute, Cleveland State University
Rhodes Tower 1210, 2121 Euclid Avenue, Cleveland, Ohio 44115-2214

申请人保证:I hereby affirm that:

上述各项中所提供的情况是真实无误的;

All the information given in this form is true and correct;

在中国学习期间,我将遵守中华人民共和国政府的法律法规及所在学校的规章制度 I shall abide by the laws of the government of P.R. China and the regulations of the University

申请人签字 Applicant's signature:

日期 Date:

For questions or more information, please contact:

Dr. Haigang Zhou, Director, Confucius Institute at CSU 216-687-3687, h.zhou16@csuohio.edu

Yuling Xie, Confucius Institute at CSU 216-523-7142, y.xie17@csuohio.edu

Submission Deadline: Friday, February 19, 2016