

**BLSS**

REGISTRATION FORM

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LEGAL NAME (as it appears on your passport)

Last (family name)	First	Middle
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EMAIL**SEX:**

- Male
 Female

Date of Birth : Month Day Year

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CITIZENSHIP**PRESENT MAILING ADDRESS**

Street and number		Good until: (Month—Day—Year)	
City		State/Province	Zip/Postal code
Country	Telephone number (area/country code)	Cell phone number (area/country code)	

EMERGENCY NOTIFICATION INFORMATION

First name		Last name	
Street and number			
City		State/Province	Zip/Postal code
Country		Telephone number (area/country code)	

EDUCATION (check highest level as of 6/2010):

<input type="checkbox"/> Some high school <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> High school diploma <input type="checkbox"/> Master's degree <input type="checkbox"/> Doctorate <input type="checkbox"/> Associate degree	Institution		
City	State/Province	Zip/Postal code	
Country			

MORE INFORMATION



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Occupation	
Mother tongue	
Bulgarian	<input type="checkbox"/> Beginners Level (A1-A2) <input type="checkbox"/> Intermediate Level (B1-B2) <input type="checkbox"/> Advanced Level (C1-C2)
Accommodation	<input type="checkbox"/> Staying at NBU accommodation offer <input type="checkbox"/> Staying with friends <input type="checkbox"/> Staying a hotel

SIGNATURE: I accept full responsibility for the information submitted on this form and certify that it is true and accurate. I also agree to abide by NBU Summer School policies and procedures.