Application Form (PCT Education) Study in China



After filling, email to: info@pinnaclecptech.com

入学申请表

| Family Name (as on passport) | Given Name (as on passport) | |
|--|-----------------------------|------------|
| Chinese Name (if available) | Gender | |
| Marital Status | Nationality | |
| Birth Date (d/m/y) | Country of Birth | |
| Place of Birth (City, Province) | Native Language | |
| Your Telephone | Whatsapp/Telegram | |
| Number | Number | |
| Highest Level of Education Completed | Religion | |
| Employer or Institution Affiliated | Occupation | |
| Your Home Address Street, City and Postal Code, and Country | | |
| Health Status | Whether in China now?* | C Yes 🖸 No |
| Emigrant from mainland China, Hong Kong, Macau, and Taiwan? | Hobby | |

Passport And Visa

| Desenant No | Passport | From date/month/year | | |
|-------------|--------------|----------------------|--------------------|--|
| | Passport No. | Expiry Date | to date/month/year | |
| | Visa No. | | Visa Expiry Date | |

Educational Background and work experience From high school to now,

|) | Year Attended (To date/month/year) | School Name | Field of Study & Diploma Received |
|---|--|-------------|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Language Proficiency (must fill in)

| Chinese Proficiency | | | |
|-------------------------------|--|---------------|--|
| Language Proficiency | | | |
| Level of HSK | | Level of HSKK | |
| Other Language Proficiency | | | |

Major to apply for (1st choice)

| enrollment category | C Chinese Language C Bachelor C Ma | aster [©] Ph.D | |
|---------------------|------------------------------------|-------------------------|--|
| academic directions | | Major | |
| Teaching Language | | | |
| Study Duration | | | |

Major to apply for (2nd choice)

| enrollment category | C Chinese Language C Bachelor C N | Naster C Ph.D | |
|---------------------|-----------------------------------|---------------|--|
| academic directions | | Major | |
| Teaching Language | | | |
| Study Duration | | | |

Family member (at least two members)

| Family Members | Name | Phone Number | Email | Position | Work Place |
|-------------------|------|--------------|-------|----------|------------|
| | | | | | |
| | | | | | |

Financial Supporter

| Guarantor name | The guarantor Addr | |
|----------------|--------------------------------|--|
| Workplace | Relationship with applicant | |
| Phone Number | Occupation | |
| | Email | |

| Emergency Contact | | | |
|-------------------|--|--------------|--|
| Name | | Relationship | |
| Workplace | | Occupation | |
| Phone number | | Email | |

Home Country Address

| Street Address | Phone Number | |
|----------------|--------------|--|
| City/Province | Mobile | |
| Country | Zip Code | |
| | | |
| Signature | | |
| | | |

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