**华语兴趣学习班申请表**

#  APPLICATION FORM FOR FOREIGNERS WISHING TO STUDY CHINESE

姓/Surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 名/Given Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

性别/Sex:□男/Male □女/Female 国籍/Nationality:\_\_\_\_\_\_\_\_\_\_

护照号码/Passport NO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

出生日期: 年 月 日 Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

出生地点/Place of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

婚姻状况/Marriage Status: □未婚/Not Married □已婚/Married

联系方式/Phone Number：\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

通讯地址/Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

电子邮箱/Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

最后学历/Highest Academic Degree Obtained:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

学校/ School:\_\_\_\_\_\_\_\_\_\_\_\_\_

汉语水平/Chinese Level:□excellent □fair □good □poor □no

学习期限/Study Period: 自 年 月至 年 月 From \_\_\_\_\_To\_\_\_\_\_

课程选择/Type of Course：□HSK(Hanyu Shuiping Kaoshi ) □ Chinese Learning

联系电话**/**Phone: 86-311-85237002；

电子邮/Email:chinastudy@hbwy.com.cn