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| Federal State Budget Educational Institution of Higher Education «Pitirim Sorokin Syktyvkar State University» | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| License for the right to provide educational services Series - № 1415 on 29.04.2015 by Federal Service for Supervision in Education and Science | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Certificate of State Accreditation Series - № 3471 on 30.12.2020 by Federal Service for Supervision in Education and Science. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *from* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | ***To the Rector of the FSBEI HE «Pitirim Sorokin Syktyvkar State University»***  ***O. A. Sotnikova*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surname | | | | |  | | | | | | | | | | | | | | | | | | | | |  |  | | Citizenship | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| Name | |  | | | | | | | | | | | | | | | | | | | | | | | |  |  | | Identity document | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| Patronymic | | | | |  | | | | | | | | | | | | | | | | | | | | |  |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| Date of birth | | | | | | | |  | | | | | | | | | | | | | | | | | |  | series | | | | | | | |  | | | | | | | | | | | | № | | | |  | | | | | | | | | | | | | | | | |  | | | |
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| Residence address /  E-mail: | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Individual insurance account number (СНИЛС) (if any) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **APPLICATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please allow me to participate in the competition for the chosen directions of training(profiles), specialty in educational programs of higher education - bachelor's, specialist's programs of SyktSU | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **№** | **Code** | | | **Direction of training** | | | | | | | | **Profile** | | | | | | | | **Form of study\*** | | | | | | | | | | | | **Foundation of admission\*\*** | | | | | | | | | | | | | | | | | **Priority** | | | | | | | | | | | | | | | | | | | | | | |
|  | 31.05.01 | | | Лечебное дело. General Medicine | | | | | | | |  | | | | | | | | Full-time | | | | | | | | | | | | Contractual basis (ПО/СВ) | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |
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| \* Specify the form of study for each direction of training (profile)/specialty: | | | | | | | | | | | | | | | | | | | | | | | | | | External, Full-time, Part-time, | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \*\* Specify the foundation of admission for each direction of training (profile)/specialty: | | | | | | | | | | | | | | | | | | | | | | | | | | State-funded (Б/B), Contractual basis (ПО/CB), Entrance Quotum (ЦП/EQ) Particular Quota (ОК/PQ) Special Quota (СК/SQ) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Please allow me to take the entrance examinations on the following grounds in the appropriate language and with appropriate special conditions: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
| **№** | **Name of the subject** | | | | | | | | | **Language of the exam** | | | | | | | | | | | | | **Special conditions\*** | | | | | | | | | | | | | | | | | | | | | | | | **Using distance technologies\*\*** | | | | | | | | | | | | | | | | | | | | | | | | |
|  | English | | | | | | | | | English | | | | | | | | | | | | | - | | | | | | | | | | | | | | | | | | | | | | | | At home | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Biology | | | | | | | | | English | | | | | | | | | | | | | - | | | | | | | | | | | | | | | | | | | | | | | | At home | | | | | | | | | | | | | | | | | | | | | | | | |
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| \* For persons with disabilities  \*\* Indicate the place of the examination | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| I report the following: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous education: | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | Finished/Graduated in | | | | | | | | | | | | | | | |  | | |  | | | | | | | | | | | | | | | | | |
| from educational institution: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Certificate/diploma | | | | | | | | | series, № | | | | | |  | | | | | | | | | | | | | | | | | | | | date of issue | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
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| Medal (certificate, diploma with honors) | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Winner of All-Russian Olympiads (member of the national team) | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Details of Olympiad diploma: | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| I have the following benefits to be admitted: | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Document granting the right to benefits: | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| I need a dormitory: | | | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | |  | | |  | | |  | |  | | | |  | |  | | | | |  | | | | |  |  | | | |  | | |  | |  | | | |  | | | |  | |  | | | |  | | |
| The return method of submitted original documents in case of non-admission for study: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Information about individual achievements: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| The champion or prize-winner status in the Olympic Games, Paralympic Games and Deaflympics, world champion, European champion, person who won first place in the world championship, European championship in sports | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| included in the programs of the Olympic Games, Paralympic Games and Deaflympics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
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| The presence of the world champion status, European champion, person who won first place at the world championship, European championship in sports not included in the programs of the Olympic Games, Paralympic Games and Deaflympics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| The presence of a gold, silver or bronze insignia of the All-Russian physical culture and sports complex "Ready for work and defense" (RWD) | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
| The presence of the sports title of master of sports, master of sports of international class | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
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| Volunteer activity: at least 50 hours | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
| Participation and (or) results of participation in Olympiads for schoolchildren (not used to obtain special rights and (or) special advantages when applying for training on specific admission conditions) and other intellectual and (or) creative competitions, thematically corresponding to the profile of the educational program:  Participant of the final stage of the event not lower than the federal level  The winner (prize-winner) of the final stage of the event is not lower than the federal level | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
| Participant of the «Win the University» contest | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
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| Winner (prize-winner) of the «Win the University» contest | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
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| The presence of the winner or prize-winner status in the national and (or) international professional skills championship among the people with disabilities «Abilimpics» | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | |
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| Owner of a medal “For special achievements in studies” of the 1st or 2nd degree from an educational organization of the Russian Federation  Completed military service by conscription, military service under contract, military service by mobilization in the Armed Forces of the Russian Federation  Participated in volunteer formations in accordance with a contract on voluntary assistance in the performance of tasks assigned to the Armed Forces of the Russian Federation or the troops of the National Guard of the Russian Federation, during a special military operation in the territories of Ukraine, the Donetsk People's Republic, the Lugansk People's Republic, the Zaporizhia region and the Kherson region | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Informed of the need to indicate in the application for admission of reliable information and to submit original documents | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| I receive higher education: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| first time not first time | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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| I was introduced to the charter of the SyktSU and its Rules for Admission and Conditions of Study: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | |  | | | | | | | | | | | | | |
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| I am acquainted with the date of granting education original document of the established form: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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| Upon admission to bachelor degree and specialist programs at places within the target figures on the basis of the right to admission without entrance examinations in accordance with part 4 of Article 71 Federal Law No. 273-FZ or the right to admission without entrance examinations based on the results of Olympiads for school students:  I confirm the submission of an application for admission on the basis of the relevant special right only to Pitirim Sorokin SyktSU: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
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| When submitting several applications for admission to Pitirim Sorokin SyktSU - I confirm the submission of an application for admission on the basis of the adequate special right only to this educational program: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
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| I confirm the absence of: | | | | | | | | | | | | | | bachelor’s degree diploma V | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |  | | | |
| specialist’s degree diploma V master’s degree diploma V | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | |  | | | |
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| I confirm the submission of an application to no more than 5 higher education organizations, including the organization to which this application is submitted: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |
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| To provide my personal data to the united portal of public services  agreed not agreed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| |  |  | | --- | --- | | Applicant’s signature  « »\_\_\_\_\_\_\_\_\_\_\_\_\_2024 | \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  (Applicant’s name) (Applicant’s signature) | | Signature of the person in charge of the admission commission  « »\_\_\_\_\_\_\_\_\_\_\_\_\_2024 | \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_  (Name of person in charge) (signature of person in charge) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |