



Ontvangen

BBC Verklaring ID Verklaring Engels

Verwerkt

BV

Bijvak Registration Form Academic Year 2020 | 2021

Personal data

Family name _____

First name(s) _____

Commonly used first name _____

(this name will be used - together with your family name - for your WUR email account. e.g. jan.jansen@wur.nl)

BSN (Citizens Service Number) _____

Country of birth _____ Nationality _____

Year Month Day

Date of birth

Gender M F

Telephone no. _____

Email _____

Duration of Registration

Period 1: 31.08.2020 - 23.10.2020

Period 4: 15.02.2021 - 12.03.2021

Period 2: 26.10.2020 - 18.12.2020

Period 5: 15.03.2021 - 07.05.2021

Period 3: 04.01.2021 - 29.01.2021

Period 6: 10.05.2021 - 31.08.2021

Address in the Netherlands

Street name and house number _____

Postal code and place of residence _____

Person to be notified in case of emergency

Name _____

Street name and house number _____

Postal code and city _____ Country _____

Telephone no. _____ Email _____

Institution 1st Enrolment

Name of Institution _____

Name of Contact Person _____

Telephone No. _____ Email _____

Type of Registration _____

I certify that I have answered the questions on this form truthfully and completely to the best of my knowledge. I hereby request the Executive Board of Wageningen University for registration at Wageningen University.

Date _____

Signature _____