

**UNIVERSITY OF SAO PAULO
FACULTY OF PHARMACEUTICAL SCIENCES
Graduate, Research and Innovation Service**

**Application Form - Graduate studies (\*mandatory)**

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| **Personal Details** |
| Full name\*: |  |
| Gender\*: |  |
| Birth Date\*: |   |  |  |  |
| Mother’s full name\*: |  |
| Father’s full name: |  |
| Marital status: |  |
| E-mail address\*: |  |
| **Place of Birth** |
| Country\*: |  |
| City/Town\*: |  |
| Nationality\*: |  |
| **Passport data** |
| Passport number\*: |  |
| Date of Issue\*: |   |  |  |  |
| Date of Expiry\*: |   |  |  |  |
| Country of Issue\*: |  |
| Code: |  |
| **Home Address** |
| Postal Code: |  |
| Country: |  |
| City/Town: |  |
| Street/house number: |  |
| Phone number: |  |
| **Previous studies (undergraduate)** |
| Name of the university\*: |  |
| University acronym: |  |
| Name of the course\*: |  |
| End date: |  |
| Degree obtained and area: (bachelor, master, doct)  |  |
| **Academic Information (currently)** |
| Home University\*: |  |
| Degree (Master or Doctoral): |   |
| **Exchange Programme Coordinator** |
| Full Name\*: |  |
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