

IMMIGRATION APPLICATION FORM

PLEASE TYPE OR USE CAPITALS:

Family name (*surname*) _____
First name(s) _____
Date of birth (dd-mm-yyyy) _____ Place of birth _____
Nationality _____ Marital status: Single/Married
Passport number _____ Valid from _____ until _____

Permanent residence (*your address outside the Netherlands*):

Street _____
Postal code and City _____
Country _____
E-mail address _____
Mobile phone nr _____

Location or place of the Dutch Embassy/Consulate where you want to pick up your MVV (*closest to your residence*).

Place: _____ **Country:** _____

(Please note that if you want to pick up your MVV in another country you must have a valid residence permit for that country)

By signing this form I authorize Saxion University of Applied Sciences:

- to be my contact person for applying for my residence permit at the Immigration Authorities and to act on my behalf.

All correspondence concerning my stay in the Netherlands should be sent to

Saxion University of Applied Sciences

International Office

Postbus 70000

7500 KB Enschede, The Netherlands

- to withdraw my registration with the Immigration Authorities if I do not start the study programme, if I cancel/quit my studies or in case I do not pass at least 50% of the nominal study workload for (the part) of the academic period.

Date: _____

Signature student