

## IMMIGRATION APPLICATIONFORM (Already in NL)

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 \_\_\_\_\_

### Address in the Netherlands

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

### Current Residence Permit

Purpose of stay: \_\_\_\_\_  
Applied by (name university): \_\_\_\_\_  
If applicable; last study date at this university: \_\_\_\_\_  
Valid from: \_\_\_\_\_ until \_\_\_\_\_  
V-number: \_\_\_\_\_

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

- to obtain information about my (educational) background in the Netherlands at the Immigration Authorities and the university who is/was the sponsor of my current Residence Permit.
- 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