



1. Choice of study

Type of study: **MA studies** System of study: **full-time studies** Field of study: **Criminology and Forensic Science**

2. contact details

Surname: **James** Email: **sharon9961george@gmail.com**  
Names: **Sharon** Phone: **+91 8590729263**



3. personal data

Gender:	<b>male</b>	Document type:	<b>passport</b>
Maiden name:		ID No:	<b>U5205708</b>
Birth date:	<b>2003-01-07</b>	Country of issue :	<b>India</b>
Birth place:	<b>Ernakulam, Kerala</b>	Pole's Card (Polish Charter):	<b>no</b>
Country of birth:	<b>India</b>	Miejsce zamieszkania przed rozpoczęciem studiów:	<b>city</b>
Father's name:	<b>James Panayil Thomas</b>		
Mother's name:	<b>Stella Graise Itikunnath Micheal</b>		
Nationality:	<b>Indian</b>		

primary address

Street number: **Panayil House, M.L.A Road**  
Flat number: **Palluruthy P.O**  
ZIP code: **682006**  
City: **Ernakulam, Kerala**  
Voivodeship:

correspondence address

Street number: **Panayil House, M.L.A Road**  
Flat number: **Palluruthy P.O**  
ZIP code: **682006**  
City: **Ernakulam, Kerala**  
Voivodeship:

Education and employment

Education: **higher education**  
Name of the completed school in Polish or English along with the name of the locality: **MES College, Marampally**

Warsaw, day **2024-07-01**

Candidate signature

Admission Office  
Okopowa Street 59, 01-043 Warsaw  
6th floor, room 603

phone: +48 22 536-54-81  
e-mail: enrollment@vizja.pl  
www.vizja.pl



I am not aware of any health contraindications due to which I cannot study at the University of Economics and Humanities in Warsaw.

Completing the fields below is for your safety. In the event of an accident or illness, please notify:

Surname: Panayil Thomas

Name: James

Relationship: Father

Telephone (with country code): +91 9747716298

I declare that I accept the Payment Terms and Conditions and the Refunds Policy of the University of Economics and Human Sciences in Warsaw.

I declare that upon arrival I will sign an Agreement on Terms and conditions of tuition payments.

Warsaw, day **2024-07-01**

Candidate signature

Admission Office

Okopowa Street 59, 01-043 Warsaw

6th floor, room 603

phone: +48 22 536-54-81

e-mail: [enrollment@vizja.pl](mailto:enrollment@vizja.pl)

[www.vizja.pl](http://www.vizja.pl)