**Registration Form for 2025 CUMT Summer School**

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| **Last Name** |  | | **Photograph** |
| **First Name** |  | |
| **Gender** |  | |
| **Date of Birth**  **(year-month-date)** |  | |
| **Nationality** |  | |
| **Phone** |  | **E-mail** |  |
| **University** |  | | |
| **Major** |  | | |
| **Education Background** |  | | |
| **Motivations**  **for the Summer School** |  | | |
| **Scanned copy of passport**  (If you don't have a passport yet, you can send us the scanned copy after you successfully apply for one.) | | | |
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Contacts: Dr. Li Jian

Tel: +86-516-83592001 Fax: +86-516-83592005 E-mail: ljcumt10@cumt.edu.cn

Address: Room A318, Administrative Building, Nanhu Campus, China University of Mining and Technology, Xuzhou, Jiangsu, China, 221116