**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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