STUDENT EXCHANGE APPLICATION FORM

International Office | Academic Exchange Programme

Please complete all sections in BLOCK CAPITALS using black or blue ink

Application Ref. No.

Semester: [ ] 1st [ ] 2nd [ ] Full Year

SECTION 1 — PERSONAL INFORMATION

Family Name / Surname

Given Name(s)

Date of Birth (DD/MM/YYYY)

Gender

Nationality

Place of Birth

Gender

☐ Male ☐ Female ☐ Other / Prefer not to say

Passport / National ID Number

Passport Expiry Date

Country of Issue

Email Address (primary)

Phone / Mobile (incl. country code)

Permanent Home Address

City

State / Province

Postal Code

Country

SECTION 2 — HOME INSTITUTION DETAILS

Home University / Institution Name

Country

Faculty / School / Department

Student ID Number

Level of Study

Level of Study

☐ Bachelor's ☐ Master's ☐ PhD / Doctoral ☐ Other

Current Year of Study

Expected Graduation Date

Cumulative GPA / Grade Average

Name of Academic Supervisor / Advisor

Supervisor Email

SECTION 3 — HOST INSTITUTION & PROGRAMME

Host University / Institution

Host Country

Proposed Faculty / Department at Host

Duration of Exchange

Proposed Start Date

Proposed End Date

Language of Instruction

SECTION 4 — LANGUAGE PROFICIENCY

Mother Tongue / First Language

Language of Instruction at Home Institution

Language	Test / Certificate	Score / Level	Date

SECTION 5 — COURSES / STUDY PLAN (List up to 5 intended courses at host institution)

#	Course Code	Course Title	Credits	Semester
1				
2				
3				
4				
5				

SECTION 6 — EMERGENCY CONTACT

Full Name

Relationship to Applicant

Phone Number