

APPLICATION FOR INCOMMING STUDENTS

Please fill in the application, print it and send it back before May 15th (Fall Semester), November 15th (Spring Semester) to

Servei de Relacions Internacionals - c/ Bellesguard, 30 08022 Barcelona internacional@uao.es

HOME UNIVERSITY DATA

university Erasmus	code (if aplicable)					
name of home univ	ersity					
home university ad	dress					
Nome of university	agordinator					
Name of university						
	fax					
	@					
PERSONAL D	AIA					
first name	last name					
gender	nationality					
date of birth	place of birth					
passport/ National	Identity number					
e-mail	@					
current address			perma	net addres	S	
Street			Street			
Number			Numb	er		
City			City			
Postal Code	Country		Posta	Code	Country	/
telephone	country code+	a	rea code	teleph	none _	
mobile telephone	country code+	a	rea code	teleph	none _	
current address val	id until:					
Please attach a co						
CURRENT ST	JDIES					
field of study	current year of study at your university					
Please attach Trai	nscript of Records	s in Englis	sh and Lear	ning Agre	ement.	

STUDY PERIOD

full academic year

first semester second semester

approximate arrival date _____ approximate departure date _____

LANGUAGE COMPETENCE

language/s of instruction at home university _____

mother language

If you wish to take courses in Spanish, please attach proof of your Spanish Language skills by including one of the following documents:

Certificate of a Spanish Language course issued by University

Official Certificate of a Spanish Language course (DELE).

In order assure a satisfactory fullfilment of a university-level work in Spanish Language we require our visiting students to proof that their level is at least an B2 in the European Framework for Languages.

If you wish to take courses in English, please attach proof of your English Language skills by including one of the following documents:

Official Certificate of English Language

Certificate of English Language issued by University

In order assure a satisfactory fullfilment of a university-level work in English Language we require our visiting students to proof that their level is at least an C1 in the Common European Framework for Languages.

INSURANCE

Which kind of insurance do you have?

European Insurance Card

Private insurance

Please, attach copy of your medical insurance

CONFIDENTIALITY POLICY

Student's signature:

CHECK LIST

Please make sure that you send a complete application. Incomplete applications will not be accepted. You should have:

Complete Application Form	Proof of Spanish Language Skills
Copy of Passport or Identity Document	Copy of your medical insurance
Transcript of Grades in English	Ever Passport photograps
Learning Agreement	