



Exchange student

Application Form

Winter term deadline: **June 1**

Summer term deadline: **December 1**

| |
|--|
| Study Program/department: |
| <input type="checkbox"/> Winter term 20____ <input type="checkbox"/> Summer term 20____ <input type="checkbox"/> Winter term 20____ and Summer term 20____ |

1. Personal data: (please print)

Please write in CAPITAL letters or type this form! Thank you.

| | |
|--|--|
| Title (Mr or Ms) | |
| Surname / Family Name (s): | |
| First name(s): | |
| Nationality indicated on passport: | |
| Sending Home University: | |
| Date of birth: (ex: day-month-year) | |
| Place of birth (Town + Country): | |
| Passport number: | |
| Issued at: | |
| Valid until: | |
| Tel: | |
| Private Email: | |
| Personal and permanent address: | |
| Street | |
| Town | |
| Postal Code | |
| Country | |

2. Emergency contact

| | |
|--|--|
| Next of Kin (Mr / Ms NAME, Firstname) | |
| Telephone (with country code) | |
| e-mail | |
| Relationship | |
| Language spoken by this person | |

3. Sending Home Institution:

| | |
|---------------------------------------|--|
| Name of Institution | |
| Department of sending university: | |
| International Coordinator | |
| Email | |
| Telephone (+ with country code) | |
| Fax: (+ with country code) | |
| International Coordinator's Signature | |
| Tutor / Professor | |
| Email | |
| Telephone (+ with country code) | |

4. Your Language Competences

please refer to the European reference for your level as below

| A1 | A2 | B1 | B2 | C1 | C2 |
|-----------|------------|--------------|--------------------|----------|-------------|
| Beginners | Elementary | Intermediate | Upper intermediate | Advanced | Proficiency |

| | Language | Level (from A1 to C1) |
|---|----------|-----------------------|
| 1 st Foreign language or native Language | | |
| 2 nd Foreign Language | | |
| 3 rd Foreign Language | | |

Please attach a language certificate for the language of instruction at Hochschule Fulda if you are not a native speaker!

5. Previous and current studies

| | Please indicate: |
|---|------------------|
| Degree for which you are <u>currently</u> studying for | |
| Number of years in higher education <u>prior</u> to departure abroad | |
| Expected graduation date: If you don't already have your Bachelor. | |
| Undergraduate studies (indicate degrees obtained and institution): | |

6. Student's signature

I apply as exchange student at Hochschule Fulda. As exchange student I can study a maximum of two semesters. The application does not entitle to graduate at the university.

| | |
|---------------------|--|
| Date | |
| Student's Signature | |

7. Check list

COMPULSORY: Documents to be attached

| | |
|---|--|
| <ul style="list-style-type: none"> Application form fully completed in <u>CAPITAL</u> letters or typed | |
| <ul style="list-style-type: none"> 1 passport copy | |
| <ul style="list-style-type: none"> Last transcripts of record and Language Certificate (if applicable) | |
| <ul style="list-style-type: none"> Learning Agreement | |

To be returned **fully** completed to:

carola.ossenkopp@verw.hs-fulda.de (Overseas Applicants)

maria.campuzano@verw.hs-fulda.de (Erasmus Applicants)

No need to send originals by post, we accept scanned application forms

Completed by Receiving Institution:

We hereby acknowledge receipt of the application and the proposed learning agreement of the candidate.

The above-mentioned student is provisionally accepted at our institution.
 not accepted at our institution.

Departmental coordinator's signature Institutional coordinator's signature

.....
 Date:..... Date:.....