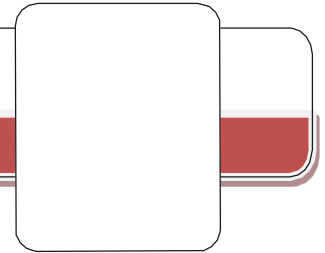


DIRECTION OF INTERNATIONAL RELATIONS
VIRTUAL STUDENT EXCHANGE

APPLICATION FORM

(Computer written, or with block letters printed in black ink)



PHOTOGRAPH

PERSONAL INFORMATION

SURNAME (S):

NAME (S):

PASSPORT NUMBER:

ID NUMBER:

DATE OF BIRTH:

NATIONALITY

PERMANENT ADDRESS: If you are an independent international student, you will receive your letter of acceptance at this address.
If you are an Exchange student, you will receive it through the International Coordinator at your university.

STREET:

N°

APARTMENT:

ZIP/POSTAL CODE:

CITY:

COUNTRY:

TELEPHONE: (COUNTRYCODE+ AREACODE+ NUMBER)

PERMANENT E-MAIL (All information will be sent to this address):

UNIVERSITY:

CURRENT STUDIES AT HOME UNIVERSITY:

PERSON TO CONTACT IN CASE OF EMERGENCY:

TELEPHONE: (COUNTRYCODE+ AREACODE+ NUMBER)

RELATION:

E-MAIL ADDRESS:

ACADEMIC INFORMATION

STUDIES THAT YOU WANT TO ATTEND AT UNIVERSIDAD DE TALCA:

UNDERGRADUATE

GRADUATE

OTHER (SPECIFY)

Faculty or School which you are applying to:

List the courses of interest (Please classify per academic program):

Spanish Language:

	Reading	Listening	Speaking	Writing
Beginner				
Average				
Fluent				
Native				

Academic period you are applying for:

Semester I (March-July)

Semester II (August-December)

Other (Specify)

PERSONAL DECLARATION

I, do hereby swear and attest that all of the information above about me and my home institution is true and correct. In case of being admitted by Universidad de Talca, I promise to comply with its rules. I also understand that my application may be rejected in case of having omitted information.

Name:

Signature:

CHECKLIST OF DOCUMENTATION

- To complete acceptance, this form must be signed by the applicant and the Director/Coordinator of the International Office.
- Curriculum Vitae
- Transcript of Records (original and simple translation to Spanish or English)
- Language Certificate (if applicable)

TYPE OF EXCHANGE AGREEMENT

- Bilateral agreement between home institution and Universidad de Talca
- CINDA Program
- Other

NAME OF THE INTERNATIONAL AREA COORDINATOR:

TELEPHONE: (COUNTRY CODE + AREA CODE + NUMBER):

E-MAIL ADDRESS:

No application will be processed without home institution approval.

DATE

SIGNATURE & STAMP