Photo

**INTERNATIONAL EXCHANGE**

**APPLICATION FORM**

**1. PERSONAL INFORMATION**

**Surname: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Birth date: \_\_/\_\_/\_\_\_\_ Place of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address in your home country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address in Rome (if any):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Tel. (with international prefix): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact tel. number in case of emergency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. ACADEMIC INFORMATION:**

**Home University: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Faculty** (e.g. Law)**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**❑Bachelor’s Degree/**

**❑Master’s Degree Number of semester of study** (e.g. 2°)**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3.EXCHANGE PERIOD**

**❑ Fall term** (Oct – Jan) **❑ Spring term** (Feb – Jun) **❑ Full year** (Oct-Jun)

**4. LANGUAGE PROFICIENCY** (CEFR level)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | None | A1 | A2 | B1 | B2 | C1 | C2 |
| Italian | ❑ | ❑ | ❑ | ❑ | ❑ | ❑ | ❑ |
| English | ❑ | ❑ | ❑ | ❑ | ❑ | ❑ | ❑ |

**5. MOBILITY LANGUAGE**

**Do you want to follow courses taught in:**

**❑** **Italian** (at least B1)❑ **English** (at least B2) ❑ **Both**

|  |
| --- |
| **6. COURSES** |
| **Courses you intend to follow at UER (minimum 18 ECTS - please consult the** [**course catalogue**](https://www.universitaeuropeadiroma.it/en/international-exchanges/#tab_accademic-offer-taught-in-english)**)**

|  |  |  |
| --- | --- | --- |
| **Course title at the Receiving Institution** | **Semester** [e.g. Fall/spring term] | **Number of ECTS credits to be awarded by the Receiving Institution upon successful completion** |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
|  |  |  |
|  |  | **Total: …** |

 |

|  |
| --- |
| **7. REQUIRED DOCUMENTS** |

 ❑ International Exchange application form

 ❑ Transcripts of records of the courses completed at your home university

 ❑ English and/or Italian language certificate (depending on the courses you chose)

 ❑ Photocopy of valid ID or passport

 ❑ European Health Insurance Card and/or health insurance

 ❑ Current health certificate

|  |  |  |  |
| --- | --- | --- | --- |
| **Date:** |  |  **Signature:** |  |