

**Student Exchange Application Form**

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| APPLICANT INFORMATION | | | | | | | | | | | | | |
| Last Name(s) | | | | | | | Given Name(s) | | | | | | |
| Street Address | | | | | | | | | | | | | Apartment/Unit # |
| City | | State/Province | | | | | | | | Zip/Postal Code | | | |
| Is the above address permanent? (Circle one) Yes No | | | | Home Phone | | | | | | Cell | | | |
| E­mail Address | | | | | | | | | | | | | |
| Alternate Address (optional) | | | | | | | | | | | | | |
| Street Address | | | | | | | | | | | | Apartment/Unit # | |
| City | | State/Province | | | | | | | | ZIP/Postal Code | | | |
| STATISTICAL DATA | | | | | | | | | | | | | |
| Gender (optional) | | | Nationality (optional) | | | | | | Date of Birth | | | | |
| The fields below are optional, however this information is needed to provide you assistance in procuring a student visa | | | | | | | | | | | | | |
| Passport Country | | | Passport current? (circle one) Yes No | | | | | Passport Expiration Date | | | | | |
| EDUCATIONAL INFORMATION | | | | | | | | | | | | | |
| Name of college or university currently attending | | | | | | | | | | | | | |
| Current Academic Major | | | | | Current year in college (circle one) 1 2 3 4 5+ Masters PhD | | | | | | | | |
| Proposed Host Institution | | | | | | | | | | | | | |
| Proposed Academic Discipline (business, biology etc.) | | | | | | | | | | | Attach a separate page listing proposed courses at the host institution, if known | | |
| Duration of Exchange (circle one) Summer Semester Year | | | | | | | Enrollment Date (semester/year) | | | | | | |
| Language at host institution | | | | | | Level of proficiency (circle one) Beginner Intermediate Advanced | | | | | | | |
| TOEFL score (if applicable) | Please note the TOEFL exam is required at all Canadian and U.S. institutions in the program | | | | | | | | | | | | |
| Internship: Is the student interested in an internship if available? | | | | | | | | | | | | | |

***Instructions:*** *Print this application form, provide the required information and submit the form to the CONAHEC student exchange coordinator at your institution. If you have any questions, contact Jason Cole at colej@email.arizona.edu*

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| STUDENT CERTIFICATION | |
| I certify that all the information provided in my application, supporting documentation and subsequent communications are complete and accurate to the best of my knowledge, and that all attached or separately submitted personal statements and responses represent my own work. I understand that I have a continuing obligation to update the information provided in this application. I accept that any misrepresentation or omission may invalidate any further consideration and may be cause for denial or cancellation of participation. | |
| Applicant Signature | Date |

**Privacy Statement:** *CONAHEC/University of Arizona does not obtain personal information about you when you visit our Websites or through other online services unless you provide us that information voluntarily. Requests for information received by e-mail may be redirected to another part of CONAHEC or the University of Arizona that may be in a better position to respond to the request. Any personal information you provide will only be released to authorized postsecondary institutions participating in the CONAHEC Student Exchange Program as indicated in your paper and/or electronic application and will not be released to outside parties unless we are legally required to do so in connection with legal proceedings law enforcement investigations, or state law.* (To view the University of Arizona Electronic Privacy Statement, please see <http://security.arizona.edu/privacy_statement>

Los estudiantes de la Universidad de Oviedo deben enviar esta solicitud a la siguiente dirección de correo electrónico: [inter.movilidad@uniovi.es](mailto:inter.movilidad@uniovi.es)