

## INTERNATIONAL EXCHANGE PROGRAM APPLICATION FORM

### I. SENDING INSTITUTION

Name of the Institution:

Address:

Exchange Students Supervisor/ Advisor:

Institution Exchange Office Address:

Exchange Office/Advisor's Phone:

Supervisor/Advisor's e-mail:

### II. PERSONAL INFORMATION

First Name:

Last Name:

Address:

Country:

Phone:

E-mail:

Date of Birth (Day Month Year):

Gender:                      Male                      Female

Place of Birth:

Country:

Nationality:

Passport Number:

Emergency contact (name/phone number)

### **III. LANGUAGE COMPETENCE**

Native Language:

Other languages:

Level of competence in Spanish: In order to be accepted, the student must certificate B2 level of proficiency in Spanish issued by DELE. Please attach DELE certificate to your application.

### **IV. ACADEMIC PROFILE**

Indicate the program you are currently enrolled in:

### **V. UAI ACADEMIC PROGRAM & EXCHANGE TERM**

Indicate the program you wish to attend to at Universidad Adolfo Ibáñez:

Beginning on:

Ending on:

Academic Year: 20     /20

### **DATE AND SIGNATURE**

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\* Send to [maria.bellot@uai.cl](mailto:maria.bellot@uai.cl) and [martina.bortignon@uai.cl](mailto:martina.bortignon@uai.cl)