

**Personal information** 

### VICERRECTORÍA DE VINCULACIÓN CON EL MEDIO

### **DIRECCIÓN DE RELACIONES INTERINSTITUCIONALES**

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### STUDENT APPLICATION FOR INTERNATIONAL EXCHANGE

Names:			
Gender:	Male	Female	
Date of birth:			
		(dd/mm/yyyy)	
Nationality:			
National Identity N	Number:		
Passport number:	:		
Address:			
		City:	
Country:			
Telephone No:		Cell phone:	
F-mail address:	(Country code/city code)	)	



# **Contact Information**

Exchange University (Home University)	c	
Address:		
County:	City:	
Country:	Phone Number:	
Person to contact at the university:		
Position:		
Family address:		
County:	City:	
Country:		
Phone Number:		
	(Country code/city code)	



## **Academic Information**

		-4 1 10	20.	
	course work you intend to complete			
Year and	semester you will attend UBO:			
Current p	orogram of study:			
Current s	emester/year of study:			
Academi	c activities you have participated:			
Summer/	Winter Courses	Sł	hort term o	courses
Assistant	ships	0	ther	
		Sp	pecify:	
	nce between the courses			
Code	Course title at the home institution	on	Code	Course title at host institution
	le proficiency dicate the language (s) you can spe	ak:		
Languag	e 1:	Stud	ies:	
Level of p	proficiency: Basic Ir	nterm	ediate	(Semesters)  Advanced
Languag	e 2:	Stud	ies:	
Level of p	porficiency: Basic	Interr	mediate	(Semesters)  Advanced



# Medical information Allergies Yes Specify: No Illness Yes Specify: No Current medications Yes Specify: No No



## **Letter of intention**

	Santiago,	, 20
Señores Dirección de Relaciones Interins Programa de Intercambio Universidad Bernardo O'Higgins		
Dear all:		
participate in the Exchange prograr	I am writing this letter m from Universidad Bernardo O'Higgins.	-
My intention is		
Sincerely,		
Name	 Sig	nature



## **Candidate's commitment**

✓	I commit to participate with good judgement in the Exchange Program for Bernardo O'Higgins University's students, delivering the required documents to implement this process.
✓	I will bear the expenses of the Exchange such as tickets, housing, transport, and others and they will be my exclusive responsibility.
✓	I will inform my home university the programs and courses that I will study so they will have the information recorded.
✓	It is my responsibility to obtain a student visa, and comply with the regulations of migration.
✓	I will be concerned of obtaining medical expenses and accidents insurance to be effective in Chile during my stay at UBO.
✓	I will accept the academic rules set by UBO to their students, during the exchange period.
✓	I understand that my residency at the host University has a limit of time that I have to accomplish.
✓	The host university will have booked an accommodation for my arrival in Santiago and I will have informed Dirección Relaciones Interinstitucionales of UBO in advance of the date and time of my arrival and the address where I will be staying.
✓	If my behavior is inappropriate, I am willing to take the cancellation of my exchange and comply with the corresponding regulations of the country.
✓	Back in my country, I will be aware of the revalidation process, being part of what it implies.
✓	I have read everything previously presented and I totally agree.
	Student's signature Date