### JEFATURA DE INTERNACIONALIZACIÓN



# APPLICATION FORM FOR INTERNATIONAL STUDENTS

Please choose the exchange modality that you would like to participate:		( Exchange			
		Exchange + Internship		Student's	
		( Exchange + Re	search assistantshi	р	recent
		<ul><li>Exchange + Se</li></ul>		ı	picture
		() Virtual Exchang	ges		
Exchange term:	( ) Jan-Apr	( ) May-Aug	( Sep-De	С	
Academic program:					
Exchange program:					
Campus: O Coli	ima 🤍 Guadalaja	ara 🌖 Lagos de M	oreno 🔘 La Pie	dad () León	
() Que	erétaro () Tepic	( ) Uruapan	( Vallart	ta 🔘 Zamora	
PERSONAL INFORMAT	TION				
PERSONAL INFORMAT				Name (s)	
Full name:	Last name			Name (s)	
Full name:Address:	Last name Street	Number		Name (s)	
Full name:	Last name Street	Number		Name (s)	
Full name:Address:	Last name Street	Number		Name (s) Zip	code
Full name:Address:Neighborhood/Suburb	Last name Street Street State:	Number	City:	Name (s) Zip Are:	code
Full name:  Address:  Neighborhood/Suburb  Country:	Last name  Street  State:Phor	Number	City:	Name (s)  Zip  Area  Cell phone number	code
Full name:  Address:  Neighborhood/Suburb  Country:  Phone number 1  Email address:	Last name  Street  State:Phor	Number  ne number 2 Birth Da	te: Month:	Name (s)  Zip  Area  Cell phone number	codea code
Full name:  Address:  Neighborhood/Suburb  Country:  Phone number 1  Email address:	Last name  Street  State: Phor	ne number 2 Birth Da	te: Month:	Name (s)  Zip  Area  Cell phone number  Day: Year:	codea code

**UNIVA GLOBLAL** 

### JEFATURA DE INTERNACIONALIZACIÓN



ADDITIONAL INFORMATION				
First language:		Other language	es spoken	
Spanish proficiency level: ( Null (	) Basic	Functional	() Fluent	
INTERNATIONAL EXPERIENCE: Places vi	risited in the	e past and length o	of stay	
Central America	. South Ame	erica	Mexico	
Others countries				
IN CASE AN EMERGENCY				
Blood type:	Allergies: _			
Are you taking any medication?	) No			
Name of medication and dose				
In case of emergency, contact:	( ) Moth	er () Somebod	/ else	
In case of emergency, contact:				First name
Contact phone number:				THISCHAINC
Contact email address:				
INFORMATION ON HOME INSTITUTION	N			
Name of home institution:				
Current semester:	Grad	de point average:	SCHOO	L TERM TO TAKE AT UNIVA:
International Office contact person:				
Program at UNIVA				<ul><li>May - Aug 20</li><li>Sep - Dec 20</li></ul>

#### **JEFATURA DE INTERNACIONALIZACIÓN**



### PROPOSAL OF SUBJECTS TO TAKE AT UNIVA

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First c	hoice	SIID	IACTS
1 11 36 6	HOICC	Jub	Jects

NAME OF SUBJECT

## In case a subject of your choice is not offered, mention other options

CODE	NAME OF SUBJECT

#### PLEASE, ENCLOSE THE FOLLOWING DOCUMENTS:

(-)	Transcript
	Motivation letter
~ _ '	Proof of Spanish or English proficiency level (wichever applies depending on whether classes will be taken in English or in Spanish)
	Nomitation letter from home institution
	Copy of passport
	International health insurance coverage
	Curriculum vitae