Universidad de Navarra
Escuela de Arquitectura

APPLICATION FORM FOR INCOMING STUDENTS ERASMUS +/ EXCHANGE PROGRAMS 2017-1018

TO BE RETURNED TO THE SCHOOL OF ARCHITECTURE BY EMAIL AND IN PDF FORMAT BEFORE 1 MAY (FOR FIRST EMESTER) / 15 OCTOBER (FOR SECOND SEMESTER)

POSTAL ADRESS: ESCUELA TÉCNICA SUPERIOR DE ARQUITECTURA
CAMPUS UNIVERSIDAD DE NAVARRA S/N
31009 PAMPLONA
SPAIN

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TO BE ENCLOSED WITH THIS APPLICATION:

- 1 COPY OF YOUR PASSPORT
- 2 PASSPORT-SIZE PHOTOS WITH NAME ON THE BACK
- 1 OFFICIAL TRANSCRIPT OF RECORDS FROM YOUR HOME UNIVERSITY (IN ENGLISH)
- 1 NOMINATION LETTER DULY SIGNED AND STAMPED BY YOUR HOME UNIVERSITY
- LEARNING AGREEMENT DULY SIGNED AND STAMPED BY YOUR HOME UNIVERSITY

Please complete this form in capital letters

PERSONAL INFORMATION

LAST NAME, FIRST NAME	
DATE OF BIRTH	**DATE OF BIRTH**
STREET	**PHONE OR MOBILE PHONE**
POSTAL CODE AND CITY	**COUNTRY**
E-MAIL	

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EMERGENCY CONTACT IN HOME COUNTRY

NAME AND RELATIONSHIP TO APPLICANT

PHONE (HOME)

PHONE (WORK)

PHONE (MOBILE)

ACADEMIC INFORMATION

HOME UNIVERSITY (FULL OFFICIAL NAME)

ERASMUS CODE

SCHOOL/FACULTY OR DEPARTMENT NAME

MAYOR FIELD OF STUDY

STUDY PERIOD AT THE SCHOOL OF ARCHITECTURE:

☐ AUTUMN SEMESTER ☐ SPRING SEMESTER ☐ FULL YEAR

PLEASE INDICATE YOUR LEVEL OF SPANISH:

B1 ☐ B2 ☐ C1 ☐ C2 ☐

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I HAVE COMPLETED THIS REGISTRATION FORM HONESTLY AND CAREFULLY WITH KNOWLEDGE I KNOW TO BE TRUE

DATE	SIGNATURE

- PLEASE MAKE SURE THAT YOU HAVE COMPLETED THIS FORM IN CAPITAL LETTERS
- REMEMBER TO KEEP COPIES FOR YOUR OWN INFORMATION
- THIS FORM MUST BE SIGNED AND RETURNED BY EMAIL TO THE SCHOOL OF ARCHITECTURE BEFORE 30 APRIL/30 SEPTEMBER
- ALL ELECTRONIC DOCUMENTS MUST BE IN PDF FORMAT