

## APPLICATION FORM FOR INCOMING STUDENTS ERASMUS+ / EXCHANGE PROGRAM **2019-2020**

TO BE RETURNED TO ISSA BY EMAIL AND IN PDF FORMAT BEFORE 1 MAY (FOR AUTUMN SEMESTER) / 15 OCTOBER (FOR SPRING SEMESTER)

**POSTAL ADDRESS:** UNIVERSITY OF NAVARRA  
ISSA SCHOOL OF MANAGEMENT ASSISTANTS  
INTERNATIONAL RELATIONS  
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CAMPUS UNIVERSITARIO  
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**TO BE ENCLOSED WITH THIS APPLICATION:**

- 1 COPY OF YOUR PASSPORT [PHOTO PAGE]
- 1 PASSPORT-SIZE PHOTO
- 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 FROM A COMPUTER

### PERSONAL INFORMATION

LAST NAME, FIRST NAME	
DATE OF BIRTH	PLACE OF BIRTH
NATIONALITY	ID CARD OR PASSPORT
STREET	PHONE OR MOBILE PHONE
POSTAL CODE AND CITY	COUNTRY
E-MAIL	



**issa**  
Universidad  
de Navarra

School of Management Assistants

#### 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 (Only Erasmus+ Program)

SCHOOL/FACULTY OR DEPARTMENT NAME

MAYOR FIELD OF STUDY

#### STUDY PERIOD AT ISSA:

☐ AUTUMN SEMESTER ☐ SPRING SEMESTER ☐ FULL YEAR

#### PLEASE INDICATE YOUR LEVEL OF SPANISH:

☐ B2 ☐ C1 ☐ C2

#### PLEASE INDICATE YOUR LEVEL OF ENGLISH:

☐ B2 ☐ C1 ☐ C2

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 E-MAIL TO ISSA BEFORE 1 MAY / 15 OCTOBER
- ALL ELECTRONIC DOCUMENTS SENT BY E-MAIL MUST BE FORMATTED AS PDF FILES.