

**UNIVERSITY OF KWAZULU-NATAL STUDENT EXCHANGE (UKZNSEP)**

**APPLICATION FORM**

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| --- |
| **NOTE: The following documentation must accompany this form:**  **1. An original academic record issued by Student Records**  **2. Letter of motivation for participation in the programme**  **3. Fee statement**  **4. Candidates on sponsorship/bursary need to provide a letter from their sponsor/bursar that provides details on the sponsorship/bursary to be received** |

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| --- |
| **Applicant’s Personal Details:** |

**First Name:** ...........................................…

**Surname:**..................................................

**1. General Information:**

|  |  |
| --- | --- |
| Student number: | Campus: |
| College: | School: |

|  |  |
| --- | --- |
| Degree programme: | Academic year: |

**2. Personal Profile:**

|  |  |  |
| --- | --- | --- |
| Sex:  Male  Female | Date of birth | Country of birth |

|  |  |  |
| --- | --- | --- |
| Citizenship | Passport number | Date of expiry (Passport must be valid for 6 months after you arrive from exchange) |

|  |  |  |
| --- | --- | --- |
| Postal Address:..................................  .................................................................................................................................................................................................................................................................................... | Residence / School Term  Address:...................................................................................................................................................................................................................................................................................................................... | Your contact details:  **Tel:**.......................................  **Cell:**......................................  **Fax:**......................................  **Email:** .................................  **Alternate contact (Name & Contact Number:**…………..  ………………………………………… |

**Which of the courses are you majoring in? Please state Course Code and Course Name**:

|  |  |
| --- | --- |
| **COURSE NAME** | **COURSE CODE** |
|  |  |
|  |  |

**State which remaining compulsory courses you must take in order to complete your degree studies, include credits outstanding:**

1............................................................................................... 2...............................................................................................

3............................................................................................... 4...............................................................................................

5……………………………………………………………………………………………

# Which year do you plan to complete your degree programme?

……………………………….

Name of Principal Academic Officer: ………………………….. Signature: ………………………….. Date: …………………

**3. Institution selected (First Choice):** …………………………………………………………………

Please fill in details and attach syllabuses for courses you intend taking at the host institution. Obtain signature from your Head of School. Once completed present to the Principal Academic Officer to obtain final signature from the Dean and Head of School then return to International Relations.

1. Name of Module to be taken abroad: ………………………………………………………………………………………

Proposed Local Equivalent: ………………………………………………………………………………………………………

Rationale: ………………………………………………………………………………………………………………………………

………………………………………………………………………………………………………………………………………………

Comments by Academic Leader, School Teaching and Learning**:**

..................................................................................................................................................

Signature and Name: ..................................................................................................................

2. Name of Module to be taken abroad: ……………………………………………………………………………………….

Proposed Local Equivalent: ………………………………………………………………………………………………………

Rationale: ………………………………………………………………………………………………………………………………

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Comments by Academic Leader, School Teaching and Learning**:**

..................................................................................................................................................

Signature and Name: ..................................................................................................................

3. Name of Module to be taken abroad: ……………………………………………………………………………………….

Proposed Local Equivalent: ………………………………………………………………………………………………………

Rationale: ………………………………………………………………………………………………………………………………

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Comments by Academic Leader, School Teaching and Learning**:**

..................................................................................................................................................

Signature and Name: ..................................................................................................................

4. Name of Module to be taken abroad: ……………………………………………………………………………………….

Proposed Local Equivalent: ………………………………………………………………………………………………………

Rationale: ………………………………………………………………………………………………………………………………

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Comments by Academic Leader, School Teaching and Learning**:**

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Signature and Name: ..................................................................................................................

**Comments by Principal Academic Officer:** ………………………………………………………………………………

………………………………………………………………………………………………………………………………………………….

**Signature of Principal Academic Officer:** ………………………………………………………………………………

**Signature of Dean and Head of School:** …………………………………………………………….......................

**Date:** .....................................

**4. Important Prerequisites**

|  |  |
| --- | --- |
| \* Do you have any fees owing to the University of KwaZulu-Natal? Yes  No   \* If yes, state the date by which you will settle it ...........................................................................................  \* Are you on financial aid / sponsorship? Yes  No   \* If yes, name and contact details of sponsors/bursars.....................................................................................................................................................................................................………………………………………………………….  ....................................................................................................................................................................................................…………………………………………………………………………………..  \* **Candidates on sponsorship to provide a letter of approval from their sponsors granting clearance to participate in the exchange** | **\*** What arrangements have you made for the payment of tuition to the University of KwaZulu-Natal **before** your departure abroad?  ........................................……………………………………………….. |

**5. Declaration**

I do declare to the best of my knowledge that the information furnished by me in this form is true and accurate. I understand that should any relevant information pertinent for the assessment of this form is false or omitted by me, UKZN International reserves the right to terminate this application without further notice.

Signature of applicant**:**...........................................................

Date**:**....................................................................................

**6. Checklists:** (Have you included the following?)

1. Two passport-sized photographs. Yes  No 

2. Your academic record issued by Student Records. Yes  No 

3. Letter of motivation. Yes  No 

4. Financial aid / financial clearance letter and Yes  No 

5. Letter from sponsor/bursar (if applicable) Yes  No 

**Issued by International Relations, University of KwaZulu-Natal, Durban 4041, South Africa.**