# APPLICATION FOR ADMISSION AS A STUDY ABROAD/ERASMUS STUDENT

**PLEASE COMPLETE THIS FORM ON A COMPUTER (DIGITALLY) BEFORE PRINTING AND SIGNING IT**

**Proposed study period at Exeter**

  

**Personal Details**

|  |  |
| --- | --- |
| Family name: | First name: |
| Title: | Nationality: |
| Date of Birth: | Country of Birth: |

Permanent Address(including postal/zip code): Correspondence Address (if different):

 

|  |  |
| --- | --- |
| Telephone: | Telephone: |
| Email: | Email: |

**Details of your Home Institution**

Name of Home Institution:

Name of Study Abroad Adviser/Erasmus Co-ordinator:

Email of Study Abroad Adviser/Erasmus Co-ordinator:

**Planned Study**

|  |  |
| --- | --- |
| Major area of study at home institution: | Level of study:  Undergraduate  Postgraduate |

Please indicate below a preliminary choice of modules to take at Exeter. Please indicate if any of your chosen modules are compulsory for completion of your degree at your home institution by checking the box in the right-hand column.

**Full time study at Exeter is 60 credits for one semester and 120 credits for a full academic year.**

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| --- | --- | --- |
| **Module Code** | **Name of Module** | **Required?** |
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**Please note that acceptance on to modules may not be confirmed before your arrival at Exeter.**

**Personal Statement**

Please write a brief statement about yourself on one side of A4 paper and attach it to your application form. You may wish to include why you want to study abroad, why you have chosen Exeter, and your academic and social interests.

**Disability Declaration**

Please check the appropriate box if you have a physical or sensory disability which might in some way affect your studies or may require special facilities or treatment. You may be required to provide documentary evidence. The information may be used to make appropriate arrangements to support your studies and will in no way affect the status of your application.

Specific learning disability e.g.  Physical impairment or mobility issues  Long standing illness or health

Dyslexia, Dyspraxia, AD(H)D, etc. such as using crutches or a wheelchair condition, e.g. HIV, diabetes, epilepsy

Blind or serious visual  Social/communication impairment  Two or more impairments and/or

Impairment, uncorrected by glasses such as Asperger’s/other autistic disorder disabling medical conditions

Deaf or serious hearing  Mental health condition, e.g. Anxiety  A disability, impairment or medical

Impairment disorder, depression, schizophrenia, etc. condition not listed above

**Data Protection**

The University of Exeter requires the information you provide on this form for education purposes. Your personal data will be processed in accordance with the University’s registration and current data protection legislation in the UK.

**Finance**

You will need sufficient funds to cover the cost of travel, accommodation and living expenses. Please confirm that you are aware of this and that you have sufficient financial support.



**Declaration**

The University is required, under the provisions of the UK Rehabilitation of Offenders Act 1974, to require you to state whether or not you have any criminal convictions, excluding motoring offences. Please tick the appropriate box. If you select ‘Yes’ you may be required to provide details of your conviction to the University.



I hereby declare that I wish to enter the University of Exeter, that the particulars given in this form are to the best of my knowledge and belief correct, and that, if admitted to the University, I shall regard myself bound by the Statutes, Ordinances, and Regulations of the University in so far as they affect me.

Signature: ………………………………………………… Date: .........../.........../...................

Please return this form together with supporting documentation to [inbound@exeter.ac.uk](mailto:inbound@exeter.ac.uk)

**FOR EXETER OFFICE USE ONLY.**

We hereby acknowledge receipt of this application and supporting documentation.

The above-mentioned student is:  Accepted  Rejected

Signature: ………………………………………………… Date: .........../.........../...................