

Application to enrol Study Abroad and Exchange

This application form is for students who are applying for Study Abroad and Exchange to the University of Waikato.

The definition of Study Abroad and Exchange for the purposes of this application form is:

You are currently enrolled in qualification in an overseas institution that you intend to complete that qualification crediting study done at the University of Waikato back to your current institution.

For all initial enquiries, contact the Student and Academic Services Division: email intladmin@waikato.ac.nz

STUDY ABROAD / EXCHANGE PARTNER

Agency/Company/Institution with the Study Abroad/Exchange agreement: _____

CITIZENSHIP

Country of citizenship: _____

Verified copy of passport enclosed

You need to provide evidence of your citizenship before completing your enrolment, please check the box to confirm you have enclosed a verified copy of your passport.

MY DETAILS

Legal first name: _____ Legal second name: _____

Legal family name / surname: _____ Preferred name: _____

Date of birth: _____ Gender: Male Female

Address

Number and street: _____ Suburb: _____

City / Town: _____ Postcode: _____

Country: _____

Phone number: _____ Mobile number: _____

Email: _____

AUTHORISED AGENCY / INSTITUTION CONTACT DETAILS

Contact Name: _____ Phone: _____

Email: _____

EMERGENCY CONTACT DETAILS

First name: _____ Family name / surname: _____

Address
Number and street: _____ Suburb: _____

City / Town: _____ Postcode: _____

Country: _____

Phone number: _____ Mobile number: _____

Email: _____

MY EDUCATION

Degree Major / Subject: _____ Verified copy of academic record enclosed

MY STUDY INTENTIONS

I am seeking admission for individual paper credits which I plan to credit transfer back to my home institution for (please tick appropriate option):

- I am applying as a Study Abroad applicant I am applying as an Exchange applicant
- 1 semester February to June 1 semester July to November
- 2 semesters February to November 2 semesters July to June

The year I intend to enrol is: _____

Papers (please refer to the paper selection forms):

_____	_____
_____	_____
_____	_____
_____	_____

STUDENTS WITH DISABILITIES

Do you live with the long term effects of disability or injury? Y N

If yes, you must complete and return the Disability Support Registration form available at www.waikato.ac.nz/disability

DECLARATION

I declare that the information I have provided in this application and in any attached documentation is true and correct, and that I have not withheld any information which could have a bearing on my enrolment or the conditions of my enrolment.

I agree to supply any further documentation requested by the University of Waikato for the purpose of my enrolment.

I have read the statement regarding the Privacy Act 1993 (see the Application Guide or www.waikato.ac.nz/go/privacy1993) and I understand that the University of Waikato will hold, use and disclose information which I have provided as explained in that statement. I also understand that I have the right to have access to information about me held by the University of Waikato and to request correction of that information, in the terms provided for under the Privacy Act 1993.

I also acknowledge that, some personal information will be used by the Ministry of Education in an authorised information matching programme for the purposes of the National Student Index.

Signature: _____ Date: _____

CHECK LIST

Please confirm that you have:

- Signed the declaration
- Provided a verified copy of your passport
- Provided a verified copy of your academic record

What is a verified copy?

A verified copy is a photocopied document signed by someone of suitable standing such as a Justice of the Peace, solicitor, barrister, court registrar, or school principal.