AUGUSTANA UNDERGRADUATE EXCHANGE STUDENT

INSTRUCTIONS: Application and Permission to Participate Form

This form must be completed, fully endorsed by the appropriate areas, and included along with all exchange student application materials to the University of Alberta. Complete application packages for exchange students must be sent directly to the Learning and Beyond office at the University of Alberta, Augustana Campus. This form is a typeable PDF form, please complete the typeable cells prior to printing and then print, review and complete the remainder of the form. Please sign and date where required prior to submitting your package.

COMPLETED APPLICATION PACKAGES FOR FALL and/or WINTER ADMISSION MUST BE RECEIVED BY APRIL 15

	A completed Augustana Undergraduate Exchange Student Application and Permission to Participate Form
	An official record of all post-secondary work completed and/or presently being taken by the student at the Home University. Official records must bear an official seal or signature.
	Documentation as required to demonstrate English Language Proficiency as stipulated by the Exchange Agreement
	If applying for on-campus accommodation, submit a completed housing application form and \$175 housing application fee (Recommended)

Please ensure that the exchange application is signed by:

Copy of passport particulars or birth certificate

The Academic Advisor of the student
A designated English language assessor (where applicable)
Exchange Liaison Officer of the home university

Undergraduate Student Exchange Application Package Checklist:

Notes:

- No application fee is required to process this application
- This form is limited to Undergraduate Exchange students only
- Students wishing to enroll in courses that require departmental consent are responsible to contact the department either by phone or in person upon arrival at the University of Alberta
- Exchange applications with incomplete forms or missing documents will lead to delays in processing
- Exchange applications require 6 8 weeks to process for admission to the University of Alberta
- Housing applications and \$175 fee must be received by April 15.

UNDERGRADUATE EXCHANGE APPLICATION FORM

Application and Permission to Participate Form

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USE OF THIS FORM

Last (family) Name

An Exchange Student is one who is admitted to the University of Alberta under a formal exchange agreement to take courses for transfer back to their home university. This form is to be used as both an application and a permission to participate form for **Undergraduate Students**, noting all courses a student wishes to take. **All sections** of this form **must** be completed. Upon receipt of a complete application package, eligibility will be determined. A Letter of Admission will be mailed to the accepted student's Exchange Officer at their home institution. Failure to submit all required documentation will lead to delays in processing, and where applicable, the student will be unable to obtain a **Study Permit** from Canadian Immigration in time to arrive in Canada before classes commence.

PERSONAL INFORMATION AND MAILING ADDRESS

Protection of Privacy - The personal information requested on this form is collected under the authority of Section 33 (c) of the Alberta Freedom of Information and Protection of Privacy Act and will be protected under Part 2 of that Act. It will be used for the purpose of administering study abroad programs. Direct any questions about this collection to: Learning and Beyond Director, Augustana Campus, University of Alberta, Camrose, Alberta, Canada, T4V 2R3, 780-679-1557, lab@augustana.ca.

First Name

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Middle Name Former Name (if applicable)										
Birth Place (Country, City)										
Male		Female		Country	of Citi	zenship				
Address (Street Address, Apartment Number, Box Number)										
City or Town				Province or State						
Country						Postal or Zip	Code			
Home Pho	one Numbe	?((include country code)			Cell/	Cell/Business Phone Number				
Permanen	t Email					First Language				
EMERGENCY CONTACT INFORMATION										
Name					Re	lationship to St	udent			
Address	City									
Province o	or State			Postal or Zip Code			Coun	try		
Home Phone Number (include country code) Fax Number										
Permanent Email					Fir	st Language				
IMMIGRATION STATUS IN CANADA (choose one)										
I already have a Study Permit Date Authorization Obtained							Valid Until			
I have applied or will be applying for a Study Permit										
I will attend the University of Alberta as a Canadian Citizen										
I will attend the University of Alberta as a Permanent Resident Date Permanent Residency Obtained										

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	Refer to the Faculty of Signature							
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EXCHANGE TERM AND YEAR (choose one) Output O								
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Academic Year	September to April	Other (sel	ect specific dates of attendan	ce) Start	End			
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ame			Country					
aculty			Att	endance Start Date				
the 'View Schedule of Classes' and search by term for desired course name and number. Please note that although courses may be listed in the Course is in the Course in th								
TERM	Course Name & Number	Class Numb er	TERM	Course Name & Number	Class Numb er			
	Course Name & Number ex. AUPHI 260	Class Numb er ex. 19319	TERM Winter TERM	Course Name & Number ex. AUPHI 260	Class Numb er ex. 19319			
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Augustana Camp		and the extending pro	, y. a Detir ee ou. e	
			Position	
Signature				
NOTIFICATION	I OF FORMAL ADM	IISSION		
(if completing this	section after printing ap	olication forms, please print cl	early using block lette	ers)
		· -	•	a will be sent to your Study Abroad Office or f your study abroad/exchange contact at your
Last (family) Name			First Name	
Position				
Address (Street Address	Apartment Number, Box Number)			
City or Town			Province or State	
Country			Postal or Zip Code	
STUDENT'S SI	GNATURE AND DE	CLARATION		
I certify that the info	rmation in this application	n is true and complete in all resp	ects and that I have with	nheld no information. I understand that
misrepresentation, f	alsification of documents	or withholding of requested inf	ormation regarding this	application are serious offences and may result in
prosecution under t	he University's codes of b	ehaviour and/or the Criminal Co	de of Canada. I agree, if a	admitted to the University of Alberta, Augustana
Campus, to comply	with the University regula	ations as stated in the University	of Alberta Calendar.	
I understand that I r	nust participate in the Un	iversity of Alberta Health Insurar	nce Plan (UAHIP) and pay	y all UAHIP fees unless I provide proof of enrolment
in the Alberta Healtl	n Care Insurance Plan and	participation in UAHIP is waived	I by the International Cer	ntre.
	ny course selection is su to register me in my sele		ability of courses as det	termined by the Registrar's Office. I authorize the
Print Name		Signature		_ Date _