

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:
Address	Suburb:
Country:	Postcode:
Phone number:	
Email:	
Lillat.	
AUTHORISED AGENCY / INSTITUTION CONTACT DETAILS	
Phone:	Mobile:
Email:	
EMERGENCY CONTACT DETAILS	
First name:	Family name / surname:
Address Number and street:	Suburb:
City / Town:	
Country:	
Phone number:	
Email:	
MY EDUCATION	
Institution qualification:	Verified copy of academic record enclosed

MY STUDY INTENTIONS	
I am seeking admission for individual paper credits w	which I plan to credit transfer back to my home institution for (please tick appropriate option):
O I am applying as a Study Abroad applicant	O I am applying as an Exchange applicant
O 1 semester February to June	O 1 semester July to November
O 2 semesters February to November	O 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 o	r injury? O Y O N
If yes, you must complete and return the Disability S	Support Registration form available at www.waikato.ac.nz/disability
DECLARATION	
I declare that the information I have provided in this information which could have a bearing on my enrol	application and in any attached documentation is true and correct, and that I have not withheld any Iment or the conditions of my enrolment.
I agree to supply any further documentation request	ted by the University of Waikato for the purpose of my enrolment.
of Waikato will hold, use and disclose information w	1993 (see the Application Guide or www.waikato.ac.nz/go/privacy1993) and I understand that the University hich I have provided as explained in that statement. I also understand that I have the right to have access to kato and to request correction of that information, in the terms provided for under the Privacy Act 1993.
I also acknowledge that, some personal information the National Student Index.	will be used by the Ministry of Education in an authorised information matching programme for the purposes of
Signature:	Date:
CHECK LIST	
Please confirm that you have:	
☐ Signed the declaration	
Provided a verified copy of your passport and	study visa/permit
Provided a verified copy of your academic red	cord
What is a verified copy? A verified copy is a photocopied document signed by or school principal.	y someone of suitable standing such as a Justice of the Peace, solicitor, barrister, court registrar,