

APPLICATION FORM

Study Abroad or Exchange 2013

Title (Tick one) Mr Miss Ms Mrs Dr	Email Address			
Other (please specify)				
amily Name	Correspondence Ad Address	I dress (This i	s the primary address th	University will use to contact
,				
Given Name(s)	State/Province			
	State/Province			
	Postcode/zipcode			
Preferred Given Name	Country			
	Telephone)	
Previous Name(s) Original or witnessed evidence of name change must be attached.		,		
ong. in the managed of the control o	Mobile Telephone)	
Date of Birth	Facsimile)	
Late of Birth				
Day Month Year				
Gender				
Male Female				
Nationality (List countries where you hold Citizenship/Residence)				
Citizenship]			
Residence Visa				
]			
Disabilities				
Do you have an impairment, disability or long-term medical condition t	nat affects your studies?			
Yes () No				

				Marienstrasse 19/20, D-10117 Berlin Tel. +49 (0)30-20458687 www.ieconline.de			
	OSED STUDY gin study in:						
Semes	ter I (Feb - June	Semester 2 (July - Nov) Summer	School (Jan - Feb)			
wish to st		Year Yea	r	Year			
	emester	Two Semesters	Summer	School			
Paper Sele	ection						
semester; F and make yo The Univers		oval for papers which:					
	fieldwork component						
	ne pre-approval colun 10-level papers.	nn below for relevant papers. Papers should b	e listed in order of prefere	nce. Please note that acceptance is auto-			
•	*	need to refer to the Guide to Enrolment 201 is a PDF from www.otago.ac.nz/international/s	•	te, www.otago.ac.nz/courses/subjects			
Paper Co	ode S1, S2,	Paper Name		Pre-approval			
	FY or SS			(please tick if pre-approval is required			
PLE ENVI 2	SI SI	Environmental History of New Zealand		/			
i. ENRO	LMENT CATEGO	PRY					
Please indic	ate how you plan to	enrol at the University of Otago					
A.	As an exchange stude	nt participating in a bilateral student exchange	agreement existing betwe	een my college/university and the			
	University of Otago.	ange Co-ordinator from your college/universit		, ,			
	Exchange.)	As a Study Abroad student participating in an approved programme at the college/university where I am enrolled. (Please have your Study Abroad Adviser from your college/university complete Section 9 – Nomination for Study Abroad or Exchange.)					
В.	Exchange.) As a Study Abroad stu (Please have your Stud						

s English your first languag	ge? Yes	O No				
f no, please attach evidenc	e of your English p	roficiency.				
est name				Result		
f you are yet to take a tes	t, please indicate wl	hen results will b	e available:			
. PREVIOUS UNIV	FRSITY STUDY	•				
. TREVIOUS UNIV	LINGITI GIOD	•				
Please list all universities y	you have attended	and years of you	ur enrolme	nt.		
Name of Institution (Beginning with current	institution)	Years of En (year to		Degree	Major Subject	Overall Grade Point Average
				<u> </u>		
ou are currently						
Freshman/Ist Year	Sopho	more/2nd Year		Junior/3rd Year	Senior/4th Year	
Master's student	PhD	student				
Master's student	PhD s	student				
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Course Name Course Name Course Name Course Name	AND SIGNATU declarations and si	y enrolled in but RE ign below.	ill later subr		n my application (whether c	
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8.	CHECKLIST FOR STUDENTS Have you included the following?					
	Certified/notarised copies of academic transcripts from all colleges or universities attended					
	ertified/notarised copy of English language results for non-native speakers of English					
	Certified/notarised copy of your birth certificate or passport (personal details page)					
	Certified/notarised copies must					
	I) be stamped with an official seal or stamp					
	2) bear the printed name and signature of the person certifying the copy					
	3) have the date when the copy was certified.					
	Please note: You must attach documentary evidence (in English) of all qualifications, including results of studies currently being undertaken. If photocopies are provided, they must be certified/notarised. The following people may witness/certify documents as true copies of the originals: Justice of the Peace; Notary Public; Solicitor; Students' Records Officer; Study Abroad/Exchange Adviser.					
9.	NOMINATION FOR STUDY ABROAD OR EXCHANGE					
This to th	section must be completed by the Study Abroad Adviser or Exchange Administrator from the institution co-ordinating the application process e University of Otago (only for student categories A and B listed in Section 4 of this form).					
This	is to certify that has been nominated and approved to apply to the University of Otago as a:					
11113	nas seen normalized and approved to apply to the stimering of stage as a					
	Study Abroad student Exchange student (as part of a bilateral student exchange agreement with the University of Otago)					
Writ	te your name, position and contact details					
C.						
Give	n name Family name					
Posit	ion (Telephone (
Addı	Email					
Addi	ress Email					
Signa	ture					
0.6.10						
Indic	ate where notification of acceptance should be sent					
	Student's correspondence address Student's permanent home address					
\bigcirc	Other address					
	Study Abroad or Exchange Office listed above in care of:					
	Study / Wilded of Exchange Office listed above in eare of.					
Give	n name Family name					
Indic	ate where academic transcripts should be sent (if different from above)					
Give	n name Family name					
Posit	ion					
Addı	ress					

PLEASE RETURN THIS FORM AND SUPPORTING DOCUMENTS TO:

MAILING ADDRESS International Office, University of Otago, PO Box 56, Dunedin 9054, New Zealand Tel 64 3 479 8344, Fax 64 3 479 8367 Email international.admissions@otago.ac.nz Website www.otago.ac.nz/international COURIER ADDRESS International Office, University of Otago Archway West Building 90 Union Place East Dunedin 9016 New Zealand