	TO BE COMPLET	TED IN		
EDUCATIONAL CULTURAL EXCHANGES DUPLICATE Important notice: candidates are required to send two completed forms to: The Assistant Registrar				
Educational Cultur	ral Exchanges			
University of P.O Box LG				
1.0 D0x L0 -	+23. Ecgon			
 The following must be enclosed as well: I. Application fee of US \$25 (non-refundable) II. Transcripts or certificates from candidate's form III. Two recent passport size photographs (one should be applied on the should be applied on th	her university/institution	fix passport-size notograph here		
1. NAME:)		
Mr. / Mrs. / Ms. (Strike out whichever is not applicable	.)			
SURNAME (LAST /FAMILY)				
OTHER NAMES (FIRST, MIDDLE)				
*(NAMES MUST CORRESPOND EXACTLY WITH THOSE USED IN YOUR PASSPORTS) 2. Sex: Male Female				
3a. Date of Birth: 3b.	Place of birth			
mm dd yy				
4a. Nationality				
5a. Marital Status: Married Single 5b. Number of children				
6. Address to which communication in connection with this application should be sent:				
	Fax			
Tel				
7. Permanent Address				
FOR OFFICIAL USE ONLY				
Application Fee Cheque / M.O. No Received and Acknowledged	Summary of applicant's educational qualifica	ation (s)		
	1			

.....

.....

Date.....

Remarks.....

8. EDUCATION

Schools/ Colleges and Universities attended with dates:

Name of School and Location	Attendance Dates	
	From	То
	······	
Current home institution		
8a. Date of expected completion: Month	Year	
9. Indicate type of programme Summer () Winter () Other ()	28-	
10. Person(s) to contact in case of emergency		
Relation to candidate		
Telephone (with area code)	ax	
IMPORTANT: AN APPLICANT WHO MAKES A FALSE RELEVANT INFORMATION MAY BE REFUSED ADMI HAS ALREADY COME INTO THE UNIVERSITY, HE/SH ASKED TO WITHDRAW	STATEMENT OR WIT SSION. IF HE/SHE HE MAY BE	
DateSignatu	are	
Note: Quote "Visiting Student" in all correspondence DECLARATION This declaration should be signed by the Director of Studies The application will be invalid if this declaration is not signed. I certify that the photograph endorsed by me is the true likeness	of the applicant Mr./Miss	/Mrs.
who is personally known to me. I have inspected his/her certificates and I am satisfied that the n the best of my knowledge, he/she is officially known to me. I confirm that the courses he/she proposes to take will count tow University. Date	ames on them conform to vards the award of the Bac	chelors degree of this
Name. Status. Address.		