



WESTICAL TERTIARY ADMISSIONS GHANA

STUDENTS EXCHANGE & INTERNATIONAL PROGRAMS APPLICATION FORM

PERIOD OF STUDY ABROAD

Period of study abroad:	Spring semester 201__ / Autumn semester 201__
Please indicate which semester(s) substitutes your study abroad:	Semester number ____ of ____ semesters
Please indicate period for your study abroad:	From: date ____ month ____ year ____ To: date ____ month ____ year ____

SENDING INSTITUTION

Faculty /School:	
Programme of study:	
Head of Programme / Department:	
International contact person: Name: Tel: E-mail:	
Sending institution:	

RECEIVING INSTITUTION

Faculty:	School Name?
Programme of study:	
Head of Programme / Department:	
International contact person: Name: Tel: E-mail:	Mark Program Month: January <input type="checkbox"/> February <input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June, July or August <input type="checkbox"/>
Receiving institution:	Institution Address:

STUDENT'S PERSONAL DATA

First name(s):		Last name(s):	
Sex:	Male __ / Female __	(date of birth):	
Phone:	In home country: While abroad:	Student No.:	
Nationality:		Place of birth:	
Permanent address in home country:		Current address abroad- valid until:	
E-Mail at home institution:		Private E-mail:	
Next of Kin Information: Whom to contact if necessary.	Name: Address: Tel: E-mail:		

PREFERRED INSTITUTIONS (in order of preference)

Institution	Country	Period of Study		Duration of stay (months)	No. of expected ECTS credits
		From	To		
1.					
2.					

Briefly state the reasons why you wish to study or abroad on our student exchange:
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LANGUAGE COMPETENCE

Mother tongue: _____						
Language of instruction at home institution (if different): _____						
Language test results (attach certificate): Language test at: _____						
Score result: _____						
Other languages	I am currently studying this language		I have sufficient knowledge to follow lectures		I will have sufficient knowledge to follow lectures if I get some extra preparation	
	Yes	No	Yes	No	Yes	No
English						
French						
Spanish						

PREVIOUS AND CURRENT STUDY

Number of higher education study years prior to departure abroad:		
Have you already been studying abroad?	Yes: ___	No: ___
If yes, when?	At which institution?	
Have you attended any exchange previously?	Yes:___	No:___
If yes <u>which country</u> , <u>when</u> and <u>which institution</u> ?		
The attached " Learning Agreement " includes full details of required courses and projects to attend during my intended study period at the Host University.		

ACCOMMODATION

Please mark if you are interested in being contacted about residential facilities for students by Westical Tertiary Admissions Ghana Limited	<input type="checkbox"/>
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Please attach:

- A description of why you want to study abroad and your personal objectives for the exchange
- An Academic Transcript provided by your University on official letterhead confirming your current enrolment status
- A Police Clearance from your country of residence
- Application fee and Processing fees Receipt. The fees are to be paid and receipt is to be provided before processing of programme documents and invitation commence.

Name of student:	Date: _____
	Signature _____
Approved by Sending Institution:	Date: _____
	Signature (Int. Contact Person) _____

RECEIVING INSTITUTION:

We: _____ hereby acknowledge the receipt of the application and the student's proposed Learning Agreement. The above-mentioned student is: accepted at our institution _____ not accepted at our institution _____	
International contact person	Head of Programme
Name:	Name:
E-mail:	Date:
Tel: +	_____ Signature