



TO BE USED ONLY FOR VISITING STUDENTS AND NOT STUDENTS COMING UNDER EXCHANGE PROGRAMMES.

# APPLICATION FORM

## VISITING STUDENTS

ACADEMIC YEAR \_\_\_\_\_ / \_\_\_\_\_

PHOTO

1st semester     2<sup>nd</sup> semester

Academic year

This application should be completed in **BLACK** in order to be easily copied and/or faxed.

### STUDENT PERSONAL DATA

Family name:.....	Tel.:.....
First name(s): .....	Mobile.....
Sex: ..... Nationality:.....	E-mail:.....
Date of birth (dd/mm/yy):.....	Permanent address (if different):
Place of birth (town):.....	.....
Country of residence:.....	.....
Current address:.....	.....
.....	.....
.....	Tel.:.....
EMERGENCY CONTACT PERSON AND PHONE NUMBER:	
.....	

### HOME INSTITUTION

Name and full address:.....
.....
Contact person at the institution
Name: .....
Telephone/Fax: .....
E-mail address: .....
Fax: .....

## ACADEMIC RECORDS

Please provide certified copies of all university results, either completed or pending, as well as an explanation of the grading system. English or Italian translation is required if originals are in another language.

### University Studies in your country

Name of home institution \_\_\_\_\_

Name of programme \_\_\_\_\_

Length of programme \_\_\_\_\_

Years attended \_\_\_\_\_

## LANGUAGE COMPETENCE

Mother tongue: .....

Language of instruction at home institution (if different): .....

### Other languages

I am currently studying this language

I have sufficient knowledge to follow lectures

I would have sufficient knowledge to follow lectures if I had some extra preparation

YES

NO

YES

NO

YES

NO

.....







.....







.....







## COURSE PREFERENCES

You will find course information on the website [www.liuc.it](http://www.liuc.it) under *International Student*

Please list your course preferences in order of priority for the relevant semester you are applying for

Semester 1 (September-December/January)

Semester 2 (February-May/June)

**COURSE TITLE**

**CREDITS**

**COURSE TITLE**

**CREDITS**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

NOTE: A full-time semester workload is 30 credits and a full-time annual workload is 60 credits.



## DECLARATION

I declare that, to the best of my knowledge, the information I have provided is true and complete. I acknowledge that LIUC may reverse any decision regarding admission on the basis of any incorrect or incomplete information provided.

I authorise LIUC to make enquiries about the information I have given in application.

I understand that I am seeking temporary entry into Italy for educational purposes only.

I understand the above conditions and accept them in full. In particular, I understand that I, or my sponsor, will be responsible for full costs of the programme for which I am seeking admission, as well as the attendant travel and living costs.

Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## CHECK LIST

- Have you attached a passport photograph?
- Have you indicated your course preferences?
- Have you attached certified copies of your qualifications and academic transcripts?
- Have you completed all relevant sections of this application?
- Have you signed the declaration?

Please note your application cannot be considered unless all the relevant documents are attached.

Return this form with supporting documentation to:  
Cristina Colombo - International Relations Office  
Università Carlo Cattaneo  
Corso Matteotti, 22  
21053 Castellanza (VA) - Italy

## DEADLINES FOR SUBMISSION:

**30<sup>th</sup> APRIL FIRST SEMESTER**  
**15<sup>th</sup> OCTOBER SECOND SEMESTER**