



Application Form for Visiting Students

Before completing this form, please refer to the [application procedure for Visiting Students](#).

I am applying for academic year: 20 .. - 20 ..

Period: Fall Winter Spring Summer

Personal information

Full legal name (as it appears on your passport), use commas to separate your last and first name

Family name (Surname) first name middle name(s)

Date of Birth (dd/mm/yyyy): _____

Nationality: _____

Home address:

Street/P.O. Box

City State/Province Zip/Post code Country

Telephone number (with country code)

Alternative telephone number (with country code)

E-mail address

Correspondence address (if different from home address):

Street/P.O. Box

City State/Province Zip/Post code Country

Currently studying at (if applicable): _____
Year of graduation from (University): _____
Degree obtained: _____

I wish to attend the following courses: (State the course code and title as seen on <https://cursusplanner.uu.nl/>)

I hereby declare that I am aware that I will have to pay to attend each course. I will transfer the appropriate amount after receiving an invoice.

Your signature is required below. Without your signature, your application is not complete and cannot be processed.

I certify that all the information provided in my application is accurate. I understand that University College Utrecht may deny me admission or enrollment if any information is found to be incomplete or inaccurate.

Signature applicant

Date of application

Please submit this form to the Registrar's Office (ucu.registrar@uu.nl)

Also, attach the following:

- a photocopy of your passport
- proof of the requirements listed on the [visiting students website](#)