



Application Form for Visiting Students (internships)

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

Period: Start date

Winter

Summer

Spring

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 perform an internship

Please provide a short description of your internship activities, learning goals, the internship host organisation and contact details.

I hereby declare that I will make a contribution of €500,- to the scholarship fund as part of my internship agreement with the University College Utrecht. I will transfer the amount after receiving an invoice

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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 as a scanned email attachment to the UCU Futures Centre (ucu.futures@uu.nl)

Important: In order to process your application, we need a photocopy of your passport. Please include this with your visiting student form.