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**Erasmus+ Exchange Student Application Form 2019 – 2020  
[Faculty of Arts]**

Please complete and return the form **via e-mail only** to: [Deirdre.Mcinerney@mic.ul.ie](mailto:Deirdre.Mcinerney@mic.ul.ie)

**Personal / Contact Information**

**Surname / Family Name:**

**First Name:**

**Gender:**            Male            Female

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

**Home (Permanent) Address:**

**E-mail Address:**

**Mobile Telephone Number:**

**Home University:**

**What period of study do you wish to spend at Mary Immaculate College?**

Autumn Semester             Spring Semester             Full Academic Year

**Name & Postal Address of Study Abroad Co-ordinator to whom transcripts should be sent:**

**Next-of-Kin (Please supply details of person who should be contacted in the event of an emergency)**

**Name:**

**Relationship to You:**

**Mobile Telephone Number:**

**E-mail Address:**

**Other Details**

Are there any special circumstances, e.g. physical disabilities, of which the College should be aware?

Yes             No

If Yes, please specify:

By submitting this application, I confirm the following:

- I wish to undertake exchange studies in the **Faculty of Arts**, Mary Immaculate College.
- I understand that programme / module information supplied represents a guide to the range of courses offered at Mary Immaculate College and does **not** guarantee the availability of or my enrolment in same.
- I understand it is my responsibility to ensure I have adequate health insurance to cover my full period of exchange studies at Mary Immaculate College.