



Insert a clear head and shoulder photo here.

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

Please complete and return the form via e-mail only to: Deirdre.Mcinerney@mic.ul.ie

Personal / Contact Information

Surname / Family Name:

First Name[s]:

Gender: **Male** **Female**

Date of Birth (dd/mm/yyyy):

Home (Permanent) Address:

E-mail Address:

Phone 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:

Telephone Number:

E-mail Address:

Other Details

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

By submitting this application, I confirm the following:

- I wish to undertake exchange studies in the **Faculty of Education**, 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.