#### Pontifícia Universidade Católica do Paraná

#### Office of International Relations

**INTERNATIONAL EXCHANGE STUDENT APPLICATION FORM**

Photo

## STUDY LEVEL:

## Undergraduate Masters Doctorate

**EXCHANGE PROGRAM ADMISSION THROUGH:**

**Brafitec  Brafagri  MARCA  SANTANDER**

**Duplo Diploma  Other? Please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**INDICATE WHICH ACADEMIC TERM YOU WISH TO STUDY AT PUCPR:**

First Semester (February - July) 20   (year)

Second Semester (July - December) 20   (year)

**Area of study you are applying for (Main Major at PUCPR):**

*Please, check information about courses offered:*

*Undergraduate:* [*http://www.pucpr.br/graduacao*](http://www.pucpr.br/graduacao)

*Graduate:* [*http://www.pucpr.br/pesquisacientifica/mestradodoutorado.php*](http://www.pucpr.br/pesquisacientifica/mestradodoutorado.php)

# PERSONAL INFORMATION

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| --- |
| First Name: |
| Middle Name(s):       Last Name: |
| Address: |
| City:       Province / State: |
| Country:       ZIP/ Postal code: |
| Telephone: (     ) (     ) |
| E-mail 1:       E-mail 2: |
| Gender:  Male  Female Date of Birth:      /     /  DD / MM / YYYY |
| Country of Birth: |
| Country of Issuance of Passport: |
| Passport Number: |

# ACADEMIC INFORMATION

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| --- |
| Home Institution: |
| Area of studies (course/major): |
| **Home Academic Coordinator Information:**  Name:  Telephone: (     ) (     )  Email:  **Home Office of International Relations Contact:**  Name:  Telephone: (     ) (     )  Email: |

**STUDY PLAN**

IMPORTANT: Please note that **this is only an initial proposal**. Your FINAL STUDY PLAN will be revised and approved by PUCPR academic coordinator (based on courses availability) upon your arrival at PUCPR campus, before you start your exchange program.

|  |  |  |
| --- | --- | --- |
| Area(s) of study at PUCPR: | | |
| PUCPR Major (“CURSO”)  Example: Administração | PUCPR Courses (“disciplinas”)  Example: Fundamentos de Administração | Nº of Credits |
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*Please, look for Undergraduate Majors (“cursos”) and Courses (“disciplinas”) at* [*http://www.pucpr.br/graduacao*](http://www.pucpr.br/graduacao)

For information of available courses in English, please go to: <http://www.pucpr.br/intercambio/englishsemester.php>

# IMPORTANT INFORMATION

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| --- |
| Any allergy / medication? |
| Any specific disease we should be aware of? |

**PORTUGUESE LANGUAGE SKILLS**

|  |  |
| --- | --- |
| Speaking | Poor  Fair  Good |
| Listening | Poor  Fair  Good |
| Reading | Poor  Fair  Good |
| Writing | Poor  Fair  Good |
| Any other language spoken other than your native: | |

# PUCPR PORTUGUESE INTENSIVE LANGUAGE PROGRAM

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| --- |
| Would you like to participate in the Portuguese Intensive Program  Yes  No  Focus of the program: Portuguese Immersion (July/2017)  *Do you wish to receive more information by email?*  *Yes  No* |

**ADDITIONAL INFORMATION**

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| --- |
| When do you plan to arrive in Brazil?       and in Curitiba? |
| Are you interested in applying to the Research Scholarship Program?  Yes  No |
| Are you interested in internship programs in your second semester in Brazil?  Yes  No |
| In case of any emergency, contact:  First Point of Contact:  Name:  Relationship:       Telephone: (     ) (     )  Second Point of Contact (preferably in Brazil)  Name:  Relationship:       Telephone: (     ) (     ) |

**STATEMENT OF PURPOSE***\**

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| --- |
| *Write an essay about yourself, your family, your academic goals and the reasons why you want to study at PUCPR.*  ***For internship purposes:*** *state your learning goals, expectations regarding internship site, learning objectives and activities to be accomplished.*  **It is important to notice that internships should be****secured by the students themselves.** |

\* If your language skills allow, please write this statement in Portuguese

|  |  |
| --- | --- |
| I hereby declare that all information given on this Application Form is true and correct and I will pay the **Administration Fee (BRL175,00 - approx. US$55) upon arrival at PUCPR.**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place / Date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Student’s Signature | I hereby declare that all the information given on this Application Form was approved by the Home Institution  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Place / Date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Office International Relations Signature |

Please enclose the documents listed below to this Application Form in one single PDF file and send to the email – [exchange@pucpr.br](mailto:exchange@pucpr.br)

**There is no need to post the original documents.**

**Documents:**

1. Academic Transcripts records

2. Passport copy (personal information page)

3 .Curriculum Vitae (Portuguese, English or Spanish) – In the case of internship

**Important:** Your application will only be processed and the offer letter issued after all the documents listed above are submitted.

After confirmation of admission, students will be required to submit one copy of their student visa and health insurance policy.

If you need any further information or assistance, please call 55 41 3271-1658 or send an email to [exchange@pucpr.br](mailto:exchange@pucpr.br)