

BILATERAL EXCHANGES
(NO APPLICATION FEE REQUIRED)

PLEASE PRINT CLEARLY OR COMPLETE ELECTRONICALLY

Home Institution: _____

Number of academic semesters completed at Home Institution: _____

Programme enrolled for at Home Institution: _____

Principal field of study at Home Institution: _____

TITLE (Mr, Ms, Dr)	LAST NAME (Surname)	INITIALS	DATE OF BIRTH (DD/MM/YYYY)

Your application must include the following documents:

1. Certified copies of official academic records (Please attach English translations if the documents are not written in English)
2. Proof of medical insurance, indicating the following:
 - a. Details of membership (independent member or dependent on parents/guardian)
 - b. Declaration that the cover will be valid for the period spent in South Africa
3. Short summary of medical cover provided
4. Copies of the identification pages of your passport (Your passport should be valid for at least one year after leaving South Africa.)
5. Course description for each course completed at your home institution
(Brief outline of content, literature list, duration of course, course level, method of examination)

Duration of Exchange:	Sem 1 (Jan-June)	<input type="radio"/>	Sem 2 (July-Dec)	<input type="radio"/>
	Full Year (Jan-Dec)	<input type="radio"/>	Full Year (July-June)	<input type="radio"/>

General Information

OFFICE USE ONLY	
Programme Code:	
Coordinator:	

Surname	
Initials	
First Names	
Date of Birth	
Title	
Marital Status	
Population Group	
Race	
Correspondence Language	
Citizenship (specify)	
Gender	
Home Language	
Address: Home, Postal & Account	
Email address:	
Address: Boarding	

ACADEMIC INFORMATION

Visit the relevant Faculty / Departmental website

www.sun.ac.za/students/AtoZ/SUN/eng/index.asp and list all the courses that you intend to follow. Please note that course selection is subject to the course offering by departments and approval from relevant departments.

IPSU or MAINSTREAM	Name of Course including numerical code i.e Economics 178

Number of credits needed during exchange semester (please indicate USA or ECTS):

Accommodation

- ☐ I have applied for University accommodation
- ☐ I intend to apply for university accommodation
(Please contact Grant Leukes (interhouse@sun.ac.za))
- ☐ I will be staying in private accommodation

Please ask the person responsible for your programme at your home university (e.g. international relations officer) to fill in the following part:

DECLARATION BY HOME UNIVERSITY

Name:.....

I hereby state that (name of the student)..... has the full support of the home university to spend the following period studying in Stellenbosch:

From:to.....

In my opinion, his/her level of English is sufficient.

Signature: _____

Date: _____

Function: _____

Division: _____

Physical Address:

Tel: _____

Fax: _____

E-mail: _____

Official stamp of the university

CONDITIONS APPLICABLE TO EXCHANGE STUDENTS

1. Exchange students register at Stellenbosch University, but they are expected to stay fully registered students of their home institution.
2. Exchange students receive a tuition waiver for the subjects directly related to their course or programme at the home institution. For all other extra subjects the tuition fees payable by local students will be charged.
3. Exchange students have to pay a Service Fee that includes:
 - Computer facilities, Internet, Student card, Photocopy quota
 - Class handouts, Laboratory costs
 - Travelling expenses (related to course work)
 - Departmental/Faculty societies
4. Students from partner universities will only be considered as "exchange students" if they are recommended by the home institution's international office or their home programme co-ordinator.

DECLARATION BY APPLICANT

I hereby declare

- (a) that I have acquainted myself with the contents of the document "INFORMATION GUIDE for international students", (available from host coordinator or the website);
- (b) that the particulars furnished by me above in this application form are true and correct;
- (c) that I fully understand that the University is entitled to cancel my registration immediately, should it become apparent that any of the particulars furnished above in this application form is/are untrue or incorrect;
- (d) that I have acquainted myself, and in the future will keep myself acquainted with the contents of the University's Statute, regulations, language policy and rules (including the Rules for Students ("Studentereglement") as set forth in the University Calendar ("Jaarboek") as framed from time to time by the Council of the University or by any other competent body or person attached to the University;
- (e) that I undertake throughout all the years for which I register as a student of the University, for whatever programme, to abide by the Statute and all the rules and regulations referred to in (d) above, including any amendments thereto and any substitutions therefore;

- (f) that I undertake not to institute a claim of any nature against the University or any employee of the University and not to hold the University or any employee of the University responsible for any damage or loss of any nature whatsoever that I, personally, or any property belonging to me may sustain and which directly or indirectly follows from any of the following: my participation in any activity of any nature whatsoever that is related to my studies or training, or to sport or recreation of any nature; or my utilisation of any premises, building, equipment or facility of the University of any nature whatsoever, or my residence in or visiting of University accommodation; and that such participation, utilisation, residence or visiting will be undertaken on my own responsibility and that I freely accept the risks involved therein; and that I understand that the University takes out no insurance to this purpose on my behalf or to my benefit.
- (g) that I authorise the University in the event of my requiring urgent medical treatment to get appropriate medical assistance and that I accept responsibility for the payment of the costs thus incurred;
- (h) that I will immediately get the necessary medical advice or treatment if I have reason to suspect that I have any contagious or infectious disease, capable of creating a risk for other persons through my participation in any aspect of University activities, including, without restriction, residence in University accommodation, attendance of any instructional occasion, taking of examinations or tests or participation in University-related projects, sport or recreation; and that, if in terms of such medical advice it is desirable, I will withdraw from any such University activity and that I indemnify the University against any liability of whatever nature that may directly or indirectly arise for the University in consequence of my failure to comply with this undertaking;
- (i) that I undertake to pay punctually all such registration tuition, class, residence and other fees as the University may from time to time charge during the years for which I register as a student of the University;
- (j) that I furthermore undertake to defray all legal costs arising for the University in the event of my failure to discharge any duty relating to the payments mentioned in (i) above.
- (k) that I accept the current policy concerning the ownership of intellectual property created by me during the course of my studies at the US.
- (l) In terms of sec 37 of the Promotion of Access to Information Act, Act 2 of 2000, you are hereby requested to treat the information furnished to you in this application form, as well as

information furnished to you by third parties as a result of my application for admission to the Stellenbosch University, as confidential.

Signed by _____ on the _____ day of _____ 20____.