Application form for Incoming

Exchange Students

|  |  |
| --- | --- |
| **Student Information** | |
| **Name:** | |
| **Faculty:** | |
| **Department:** | |
| **E-mail:** | |
| **Mobile:** | |
| **Home Institution:** | |
| **Country:** | |
| **Level** | |
| **□ Graduate** | **□ Undergraduate** |
| **Exchange Semesters** | |
| **□ Fall 20\_ \_** | |
| **□ Spring 20\_ \_** | |
| **□ Summer 20\_ \_** | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Application form should be sent by email or fax by your home institution to the Office of International Relations at The University of Jordan:**  **Email:** [**studentexchange.oirp@ju.edu.jo**](mailto:studentexchange.oirp@ju.edu.jo)  **Fax: +962 6 5300819**   |  |  | | --- | --- | | **................................ Student Name:** | | | **............................... Date:** | **................................ Student Signature:** | |   **The following documents should be attached to the application form.**   * **Nomination letter from home university.** * **Personal photo (scanned).** * **Copy of passport page with personal information.** * **Copy of bachelor degree or master’s degree certificate for students applying for graduate courses.** |

|  |  |  |
| --- | --- | --- |
| **Proposed Course Selection at The University of Jordan** | | |
| **The University of Jordan Course Details** | | |
| **Credit Hours** | **Course Title** | **Course Code** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |
| --- |
| * **I declare that to the best of my knowledge the information supplied is correct and complete.** * **I understand that I am applying to The University of Jordan to study as a non-degree exchange student.** * **I understand that The University of Jordan cannot guarantee that any or all courses required for my academic program will be offered during the period of my exchange program and that faculties and departments at the University have the right to restrict enrolment in certain courses.** |

|  |  |
| --- | --- |
| **................................ Student Name:** | |
| **............................... Date:** | **................................ Student Signature:** | |