



APPLICATION FORM STUDY ABROAD PROGRAMME

Individual enrolments: Send this Application Form to studyabroad@uvic.cat				
Personal Data				
Given name(s) (as stated in passport)				
Surname(s)				
Passport Number				
Gender	☐ Male ☐ Female			
Date of birth (dd/mm/yyyy)				
Place of birth (Town/City, Country)				
Contact information				
Postal address				
Post code				
Town/City				
Nationality				
Telephone				
E-mail address ¹				
Contact details in case of emergency Your Emergency Contact is the person you	y would like called first should you have an emergency.			
First name and surname				
Relation				
Emergency phone number				

¹ (UVic-UCC will contact you by this e-mail)





Academic Data

Code	Course	Credits	Semester	Language
Further informati	offer the possibility for			
University where studying	you are currently			
Remarks				
How did you learn about the program				
Support Services				
	sed in a confidential ma	anner by Student Lif	e and Learning to ass.	ist you in accessing
Do you have a disatudies?	ability, impairment or	long-term medica	Il condition, which m	ay affect your
			_	
No ∐ Yes ∐ → L	🗌 Hearing 🔲 Learni	ng 🔛 Mobility 📙 🖰	Vision ∐ Medical	





Attachments

Please send the following documents with this application form to <u>studyabroad@uvic.cat</u>
☐ Passport / ID Card
☐ Document confirming your higher education institution enrolment
☐ English knowledge accreditation
Academic Record
☐ Photo
Others
☐ I accept the general conditions
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $
\square I certify that the information and data used to fill in the application are true and correspond to my person.
☐ I agree that UVic-UCC will process my data as part of admissions, registration, and educational support.
Signature:
Date:

Basic data protection information

Data processing is carried out under the authority of the Balmes University Foundation, which is the UVic-UCC proprietor. The purpose is to offer higher education services. Data is treated for provision of educational services and in compliance with legal obligations. Data is passed to responsible public educational authorities and to other organisations under the terms of collaboration agreements. Data communication resulting from other processes shall be notified when the occasion arises. You may exercise your right to access, rectification, deletion, restriction of use and opposition to processing of your data by contacting dpd@uvic.cat (Universitat de Vic - Universitat Central de Catalunya. Carrer Perot Rocaguinarda, 17 Vic 08500, CIF G58020124, Phone (+34 938 861 222)

Further steps

After acceptance, a **compulsory health insurance** or **European Health Insurance Card** (EHIC – European citizens) will be required. The insurance must cover your stay in Spain for emergency medical treatment, accidents, illness, civil liability, and repatriation. It must cover the entire period of the programme.

Payment method

You will receive a registration document with the final tuition fees you must pay according to the amount of ECTS enrolled. The bank details will be provided in order to make the wire transfer. A copy of the payment confirmation will be required.

When you have paid the fees, we will send you a letter of acceptance so you can apply for a visa, if necessary.