



Coordinator, Academic Administration
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APPLICATION FOR ADMISSION STUDENT EXCHANGE PROGRAM

Application Deadline: May 1 (preferred); Applications must be received 3 months prior to start of term

Personal Information – PLEASE PRINT CLEARLY

Title: _____ Family Name: _____ First Name: _____

Date of Birth (day/month/year): _____ Country of Citizenship: _____

Country of Birth: _____

Applicant's Mailing Address

Apt. Number/Street _____ City/Town _____

Province/State _____ Postal Code _____ Country _____

Country Code/City or Area Code/Home Telephone _____ Country Code/City or Area Code/Alternate Telephone _____

Applicant's E-mail Address _____

Emergency Contact Information

Family Name: _____ First Name: _____ Relationship _____

Apt. Number/Street _____ City/Town _____

Province/State _____ Postal Code _____ Country _____

Country Code/City or Area Code/Telephone Number _____ E-mail Address _____

Academic Information

I am requesting admission to (Term and Year):

☐ Fall (September to December) ☐ Spring (January to April) Year _____

Home University _____ Years of academic study completed _____

Contact Person at Home University _____ E-mail Address _____

Permission to Share Contact Information

The Faculty of Law and the International Centre for Students (ICS) Offices at UVic are not allowed to give your e-mail address or phone number to anyone else without your permission. We would like your permission to add your e-mail to UVic Law and ICS student listservs as well as to share your e-mail address with UVic students interested in attending your home university. Please sign below if you wish to give permission.

I, _____ (Name), give my permission to the staff of the UVic Law and the ICS Offices to share my e-mail address with other students. I understand that the information will be used solely to enhance my or other students' exchange experience.

Signed: _____ Date: _____

Permission for UVic to Disclose Information to my Home Institution

I consent to the University of Victoria disclosing my progress reports and/or official transcripts and any other pertinent information about my conduct while on the exchange, including, but not limited to information about my academic performance, academic record or disciplinary records as may be requested by my home institution to my home institution on an interim and final basis as required. I understand that UVic will forward my official transcript to my home institution upon completion of my exchange studies.

Signature: _____ Date: _____

Declaration

I accept and submit myself to the statutes, rules, regulations and ordinances of the University of Victoria as authorized by the Senate and the Board of Governors and the Faculty of Law and to any amendments thereto which may be made while I am a student of the University and I promise to observe the same. I consent and authorize the disclosure of any information to the University of Victoria by an educational institution for the purpose of verifying information provided as part of this process and I understand that an admissions or registration granted on the basis of this application may be revoked if the answers given above are untrue in any material respect.

Signature: _____ Date: _____

Application Checklist for Admission

- ☐ Completed application form
- ☐ One recent passport-sized colour photo (head and shoulders)
- ☐ Copy of most recent transcript (in English)
- ☐ Letter of recommendation from appropriate university official supporting your application
- ☐ Essay: In approximately 500 words, please describe yourself – your personal and academic background, your interests and your reasons for applying to participate in the exchange program.

Endorsement by University Personnel

I _____ **(please print name clearly)** endorse the application of the above-named student for participation in the exchange program at the University of Victoria, Faculty of Law.

Signed: _____ Date: _____

Title: _____ Institution: _____

Phone: _____ Email: _____