



**1. PERSONAL INFORMATION**

First Name:.....  
Last Name: .....

Date of Birth (day/month/year):..... Gender: M  F

Nationality:.....

Address:.....  
.....

City:..... State/Province:..... Country:.....

Telephone:..... E-mail:.....

**2. HOME UNIVERSITY**

University:.....

Address:.....  
.....

City:..... State/Province:..... Country:.....

**3. ACADEMIC INFORMATION – HOME UNIVERSITY**

**Please attach academic transcript.**

Career:.....

Semester when starting exchange program: I II III IV V VI VII VIII IX X

**4. SPANISH LEVEL**

Mother tongue       Advanced       Intermediate       Basic

Other languages: .....

**5. ACADEMIC INFORMATION – UNIVERSIDAD SANTO TOMÁS - CHILE**

Indicate the academic period you want to start the exchange.

- First Semester 201... (March - Jul)                       Second Semester 201... (August - Dec)

Indicate the campus in which you want to carry out your exchange program.

- |                                      |                                       |                                       |
|--------------------------------------|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Arica       | <input type="checkbox"/> Viña del Mar | <input type="checkbox"/> Los Ángeles  |
| <input type="checkbox"/> Iquique     | <input type="checkbox"/> Santiago     | <input type="checkbox"/> Temuco       |
| <input type="checkbox"/> Antofagasta | <input type="checkbox"/> Talca        | <input type="checkbox"/> Osorno       |
| <input type="checkbox"/> La Serena   | <input type="checkbox"/> Concepción   | <input type="checkbox"/> Puerto Montt |

Indicate the subjects of UST-Chile you are interested in studying during your exchange period.

Code	Career	Subject

**6. STATEMENT**

The decision to apply has been made freely and voluntarily, and Universidad Santo Tomás - Chile is in anyway responsible for this, and for the actions carried out by me during my stay in the country. Also, I will hire a health and accident medical insurance during the duration of the exchange program.

\_\_\_\_\_  
**Applicant's Signature**

\_\_\_\_\_  
**International Office Signature & Stamp**