|  |  |  |
| --- | --- | --- |
|  | **Application Form**  **Incoming student**  **Academic year Select...** |  |

**Student’s Personal Data**

Surname:       Name:

Gender: Select... ID/Passport n.:

Nationality:    Date of birth: Select…

E‐mail\*:

(\*) it is compulsory to complete this field

**Home Address**

Permanent address:

Postcode:       City:

Country:

Phone\*: +

(\*) preferably mobile phone‐country code/area code/n.

**Person to be contacted in case of emergency**

Surname:       Name:

Address:

Post Code:       City:

Country:

Phone\*:

E‐mail:

(\*) country code/area code/n.

**Study Data**

Name of the home institution\*:

Address:

Postcode:

City and country:

Erasmus ID code of the institution\*\*:

Field of study:       Activity type: Select…

Cycle of studies: Select... Current year of study: Select...

Study period at the IPCB: Select...

Provisional date of arrival: Select… Numbers of months:

(\*) Official name of the institution.

(\*\*) if applicable

**International Departmental Coordinator at the home university**

Surname:       Name:

Address:

Post Code:       City:

Phone\*:

E‐mail:

(\*) Country code/area code/n.

**Language**

Mother language:

**Foreign languages:**

Language:       Level: Select...

Language:       Level: Select...

Language:       Level: Select...

Referring to the above information and to the attached documents\* I hereby apply for admission to the ICPB.

Student’s signature Date: Select…

I hereby, as an official representative of my institution, verify the above‐mentioned student is officially selected as our candidate to the IPCB.

International Institutional Coordinator’s signature and stamp

Date: Select…

Name of signatory:

**Deadline: for autumn semester and full academic year - May 31 (or April 30 for students with visa requirements); for spring semester - November 30 (or October 31 for students with visa requirements.**

**\*Documents to be attached:**

1. Incoming Student Application Form completed and signed (fill in the computer not handwritten);

Portfolio (CD or DVD and paper or digital book for arts student only);

Learning Agreement for Studies or for Traineeships;

ID card/Passport copy and one photo.

**Please return the original application form and all documents by regular mail to:**

Instituto Politécnico de Castelo Branco

International Relations Office

Av. Pedro Álvares Cabral, n.º 12

6000-084 Castelo Branco

Portugal

Tel: + 351 272 339 600 Fax: + 351 272 339 601

E-mail: gri@ipcb.pt

www.ipcb.pt