Incoming Exchange Application

Apartment Number (if applicable)

City, Province/State, Country

Postal Code



This form is for undergraduate students ap	olying for an exchange under the terms of an existing exchange agreement
between your institution and Mount Saint V	
Applicants must be nominated by your ho	ne institution.
Application Deadlines:	
June 20 th for admission to the Fall S	emester (September - December)
October 20 th for admission to the Wi	nter Semester (January - April)
Note:	ease email us at global@msvu.ca and do NOT contact any other departments.
 Should you have any questions, ple Please use <u>Adobe Acrobat Reader</u> 	
A Ticase use Adobe Actobat Reduct	to open and mi out this form.
applicant's Personal Information:	
Given Name (as it is on your passport)	
Family Name (as it is on your passport)	
Country of Citizenship	
lf not Canadian, do you have landed immi	grant status in Canada? Yes No
Sex (as it is on your passport)	
Date of Birth (DD/MMM/YYYY)	
Email Address	
Phone Number	
First Language	
Academic Program at Home Institution	
How many semesters will you have compl	eted at home institution when starting your exchange at MSVU?
Do you have a previous postsecondary de	gree? Yes No
Mailing Address:	
Street Number and Name	

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Approval by Home Institution:	
Name of Home Institution	
Name of Exchange Coordinator	
Coordinator's Email Address	
Coordinator's Phone Number	
Declaration by Home Institution:	
This student is nominated to study at MSVU under the excha	nge agreement between MSVU and the student's home
institution.	
Signature of Exchange Coordinator:	Date (DD/MMM/YYYY):
Type of Exchange:	
Check the type of exchange agreement under which you will	be studying at MSVU (you can check only one option).
O Canada - European Union Public Relations Mobility F	Program
North American Mobility Program	
Regular Exchange	
Proof of English Competence:	
☐ TOEFL (Test of English as a Foreign Language)	Score:
☐ IELTS (International English Language Testing System	m) Score:
☐ Others:	Score:
Intended Semester(s) of Exchange at MSVU (you can d	check more than one option):
☐ Fall Semester (September – December) in the Year of	of
☐ Winter Semester (January – April) in the Year of	

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Intended Courses at MSVU:

Students must register for courses before arriving in Canada and must have a written approval by your home institution.

Exchange students are required to take minimum 3 up to 5 courses per semester. Please list, in order of preference, the courses you are interested in at MSVU. Make the list by referring to the Academic Calendar at www.msvu.ca/calendar, and by checking the available offerings at https://colssprod.msvu.ca/student/courses/. When checking the available offerings, please choose "Advanced Search".

Number	Course Code (for instance: BUSI*1112-05)	Number	Course Code (for instance: BUSI*1112-05)
1		6	
2		7	
3		8	
4		9	
5		10	

Required Documents:

Please ask your coordinator to email the following documents to us at global@msvu.ca:

- 1. the completed Incoming Exchange Application Form
- 2. a scanned copy of your passport identification page
- 3. a professional headshot (such as an ID photo)
- 4. an official copy of your academic transcript in English, which should include all the courses you expect to complete before starting your exchange at MSVU
- 5. a copy of brief course descriptions in English of all the courses listed on your transcript
- 6. proof of English competence

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GuardMe International, MSVU's health insurance plan, is mandatory for all international students at MSVU, including	
xchange students. If you do not agree, you are not eligible to attend Mount Saint Vincent University. Please check the	
ollowing statement:	
☐ I agree to pay the cost of health insurance at MSVU by the specified payment deadline.	
Declaration by Applicant:	
☐ I declare that I have read the above application, have a good comprehension of the requirements indicated, and the	at
to the best of my knowledge the information supplied is correct and complete.	
☐ I recognize that it is my responsibility to provide all necessary documentary evidence of my qualifications, studies a	nd
experience and hereby authorize Mount Saint Vincent University to obtain further information where necessary.	
☐ I agree to present the original copies of my academic results and transcripts for verification by Mount Saint Vincent	[
University.	
☐ Mount Saint Vincent University reserves the right to withdraw any offer to me or cease my enrolment at any stage	
during my course of study where false or misleading information has been provided.	
☐ I understand that I will be admitted as a non-degree student at Mount Saint Vincent University.	
☐ I understand that Mount Saint Vincent University cannot guarantee that any or all courses required for my academi	С
program will be offered during the period of my exchange, and that individual faculties and departments at Mount	
Saint Vincent University have the right to refuse access to courses to exchange students.	
☐ I also agree in general to abide by all the rules and regulations of Mount Saint Vincent University.	
pplicant's Signature: Date (DD/MMM/YYYY):	