

Pontifícia Universidade Católica do Paraná Office of International Relations

INTERNATIONAL STUDENT APPLICATION FORM

STUDY LEVEL: Undergraduate Masters Doctorate	Photo				
EXCHANGE PROGRAM ADMISSION THROUGH:					
☐ Brafitec ☐ Brafagri ☐ Erasmus Mundus ☐ MARCA ☐ SANTANDER					
☐ Duplo Diploma ☐ Other? Please specify					
INDICATE WHICH ACADEMIC TERM YOU WISH TO STUDY AT PUCPR:					
First Semester (February - July) 20 (year)					
Second Semester (July - December) 20 (year)					
Area of study you are applying for (Main Major at PUCPR): Please, check information about courses offered: Undergraduate: http://www.pucpr.br/graduacao Specialization: http://www.pucpr.br/pesquisacientifica/mestradodoutorado.php PERSONAL INFORMATION					
First Name:					
Middle Name(s): Last Name:					
Address:					
City: Province / State:					
Country: ZIP/ Postal code:					
Telephone: () ()					
E-mail 1: E-mail 2:					
Gender: Male Date of Birth: / /					
Country of Birth:					
Country of Issuance of Passport:					
Passport Number:					
ACADEMIC INFORMATION					
Home Institution:					
Area of studies (course/major):					
Home Academic Coordinator Information:					
Name:					
Telephone: () ()					
Email:					

Home Office	of International R	elations Contact:			
Name:					
Telephone: ()()				
Email:					
STUDY PLAN					
evised and appro	oved by PUCPR aca	only an initial proposal. Your FINAL demic coordinator (based on courses a start your exchange program.			
Area(s) of stud	ly at PUCPR:				
PUCPR Major		PUCPR Courses ("disciplinas"			
Example: Adminis	stração	Example: Fundamentos de Administ	ração		
		("cursos") and Courses ("disciplinas") at	<u> </u>		
http://www.pucpr.b For information of	<u>br/graduacao</u> available courses in l	English, please go to:			
	or/intercambio/english				
MPORTANT IN	FORMATION				
Any allergy / n	nedication?				
Any specific d	isease we should b	e aware of?			
PORTUGUESE	LANGUAGE SKI	LS			
Speaking	Poor	☐ Fair ☐ Good			
Listening	Poor	☐ Fair ☐ Good			
Reading	Poor	☐ Fair ☐ Good			
Writing	Poor	Fair Good			
	guage spoken othe	<u> </u>			
Any other lang	Juage spoken othe	than you halive.			
PUCPR PORTU	JGUESE INTENSI	VE LANGUAGE PROGRAM			
Would you like	to participate in th	e Portuguese Intensive Program	Yes No		
•		e Immersion (January February/201			
•		r email address the Program Flyer?			
		<u> </u>			
ACCOMMODA Would you like	TION to receive the Hou	sing List?	□No		
•			···		
If so, please inform your preferred email:					

ADDITIONAL INFORMATION

When do you plan to arrive in Brazil?	and in Curi	tiba?			
When do you plan to leave Brazil?					
In case of any emergency, contact:					
First Point of Contact:					
Name:					
Relationship:	Telephone: () ()		
Second Point of Contact (preferably in	Brazil)				
Name:					
Relationship:	Telephone: () ()		
STATEMENT OF PURPOSE*					
Write an essay about yourself, your family, your academic goals and the reasons why you want to study at PUCPR. For internship purposes: state your learning goals, expectations regarding internship site, learning objectives and activities to be accomplished. It is important to notice that internships should be secured by the students themselves.					

^{*} If your language skills allow, please write this statement in Portuguese

I hereby declare that all information given on this Application Form is true and correct and I will pay the Administration Fee (BRL175,00 - approx. US\$60) upon arrival at PUCPR.	I hereby declare that all the information given on this Application Form was approved by the Home Institution
Place / Date	Place / Date
Student's Signature	Home Office International Relations Signature

Please enclose the documents listed below to this Application Form in one single PDF file and send to the email – exchange@pucpr.br

There is no need to post the original documents.

Documents:

- 1. Academic Transcripts records
- 2. Passport copy (personal information page)
- 3 . Résumé (Portuguese, English or Spanish)

Important: Your application will only be processed and the offer letter issued after all the documents listed above are submitted.

After confirmation of admission, students will be required to submit one copy of their student visa and health insurance policy.

If you need any further information or assistance, please call 55 41 3271-1658 or send an email to exchange@pucpr.br