

Personal Information

First name	Last name	Digital Picture
Nationality		
Place of birth		
Date of birth ____/____/____ mm / dd / yy		
Age	Gender M F	Passport / ID Number
Home mailing address		Student's e-mail address
		Student's phone number
Country	Zip code	Emergency contact name
Home phone number		Email
		Phone
Do you have an American visa?		
Yes No		
Scholarship you are applying to:		
Term you are applying for:		Major at ULACIT
English Level		
Specify any medical condition , medicines or treatments you are taking		
		Current Academic Year at ULACIT

Declaration of Consent

I certify that the information given in this application and the documents provided are correct and complete to the best of my knowledge and belief. I understand that any discrepancies in these details may result in my enrollment being cancelled. **Yes**

I have taken notice that information on this form will be stored electronically and used by the international office in accordance with the provisions of the Costa Rican data privacy regulation laws. **Yes**

I agree that my name and email address can be forwarded to students for the purposes of promoting the exchange program. **Yes No**

I hereby confirm that I will comply with the laws of my host country. **Yes**

I hereby confirm that I will comply with the rules and regulations of both ULACIT and the hosting institution. **Yes**

I hereby confirm that I will obtain international insurance coverage before my experience abroad. **Yes**

I understand that the completion of this form does not guarantee that I will be accepted for a scholarship abroad.. **Yes**

I hereby confirm that I will comply with all program requirements, including those noted in the document "Políticas y Asignación de Becas".

Yes

- **The information in this document may be verified at any moment during the application process.**
- **Illegible forms will be sent back. We advise applicants to have all the requested information handy as this form cannot be saved (this form is expected to be sent in PDF format). Please print it and sign it.**
- **Please attach the following documents to this form:**
 - **Passport-sized digital picture**
 - **Passport main page**
- **Please send this form thoroughly filled out to: studyabroad@ulacit.ac.cr**

Student's signature:

Date (mm/dd/yy):