**Programme details**

Period of study: 
- Academic year: ............................................
- □ Semester 1: September – January
- □ Semester 2: February – June

Field of study at the university of Groningen: ..............................................................................................

**Personal details  *Please write your name as shown in your passport***

Family name*: ..............................................................................................................................................

First name(s)*: .............................................................................................................................................

Preferred name: .................................................................................................................................

■ male □ female

Date of birth: (dd/mm/yy)........................................

Nationality: .................................................................................................................................

**Correspondence address (not PO Box address):**

Street and number: .............................................................................................................................

City: ....................................................................................................Postal code: .................................

Country: ...........................................................................................................................................

Phone number: ..................................................................................................................................

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

**Permanent address (not PO Box address):**

Street and number: .............................................................................................................................

City: ....................................................................................................Postal code: .................................

Country: ...........................................................................................................................................

Phone number: ..................................................................................................................................

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

Phone number: .................................................................................................................................(include country code)
Course Selection form

Students participating in the Freemover programme may select courses from the Course Overview for Exchange Students offered by the Faculty of Arts. Admission/placement (to courses) will be given on the following conditions:

- you meet the pre-requisites for the courses
- the courses are available
- the relevant department gives approval

**Home University:**

City: ................................................................. Country: .................................................................

Current study: .................................................. Subject major: ..................................................

Current year: ..................................................... Current degree: .............................................

Detailed course descriptions can be found at the website [www.rug.nl/let/what-can-I-study](http://www.rug.nl/let/what-can-I-study)

department | Course code | Course title
---|---|---
1. | | .................................................................
2. | | .................................................................
3. | | .................................................................
4. | | .................................................................
5. | | .................................................................
6. | | .................................................................
7. | | .................................................................

**English language requirements**

Students whose native language is not English are required to provide official documentation to prove English proficiency through one of the following means:

- Native speaker
- CEFR B2/C1
- TOEFL iBT 92* (with a minimum of 20 for each section, paper-based 580)
- IELTS score 6.5* (with a minimum of 6.0 for each section)

*Students who want to enroll in MA courses and all courses taught by the English Department or Department of American Studies must have a higher level of proficiency TOEFL 105 (620 paper based), IELTS 7, CEFR (Common European Framework of Reference) C1/C2 or Cambridge Exams: CAE.
Person to contact in case emergency *(notify RUG staff ASAP if any of these details change!)*

Name: .............................................................. Relationship: ....................................................

Street and number: ............................................................................................................................

City: ........................................................................ Postal code: .....................................................

Country: ........................................................................ Phone number: ........................................

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

(Include country code)

Checklist of required materials

Please include the following documentation with your application:

☐ Motivation Letter

☐ Official academic transcript, **in English**, showing your current undergraduate credits and grades at university.

☐ English language test results

☐ Proof of enrollment at your home university

☐ Proof of medical insurance

☐ 2 passport pictures

☐ 1 copy of your passport

☐ Course selection form

Signature:

I hereby declare that the information I have provided is true to the best of my knowledge. I am aware of the admission requirements and costs for participating in the Programme for Contact Students.

Name of the Applicant: ..............................................................

...............................................................................(signature)...............................(date)

Return this form, with all supporting documentation to:

**Mobility Office – Faculty of Arts**
**Oude Kijk in ‘t Jatstraat 26**
**9712 EK Groningen**
**the Netherlands**