

Inbound Student Exchange Nomination Form

HOST INSTITUTION INFORMATION

Home Institution name: _____

Study Abroad/Exchange Coordinator: _____

Coordinator phone number: _____

Coordinator e-mail address: _____

Coordinator signature for nomination/s: _____

NOMINATED EXCHANGE STUDENT INFORMATION

Student Name: _____

DOB (è DD/MM): ____/____/____ Phone number: _____

Email address: _____

Degree of study (Major): _____

Exchange duration:

One Semester

Two Semesters (Full Year)

Exchange commencement:

Semester 1 (February to June)

Semester 2 (July to November)

Year of exchange:

20____

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INSTRUCTIONS

x Please return this form, along with the students original certified transcripts and proof of English language proficiency (if applicable) to La Trobe Abroad by the respective deadline.

x Please also remind students to apply using the online portal by the deadline mentioned below.

Deadlines: Exchange in Semester 1 (Feb to June) – 15th October (previous year)
Exchange in Semester 2 (July to Nov) – 31st March (of the same year)

Mail to: La Trobe Abroad
La Trobe International
La Trobe University
Bundoora, VIC 3086
Australia

E-mail: studyabroad@latrobe.edu.au

For more information regarding the application process, please see:
<http://www.latrobe.edu.au/international/edabroad/exchange/coming>