

# EXCHANGE PROGRAM APPLICATION

IMPORTANT: ENTIRE APPLICATION MUST BE COMPLETED.  
PLEASE READ INSERTS THOROUGHLY.



## UNIVERSITY OF THE INCARNATE WORD

Study Abroad Office  
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Phone: 210.805.5709  
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[www.uiw.edu](http://www.uiw.edu)

# APPLICATION CHECKLIST

**1. COMPLETE AND SIGN APPLICATION**

- The application must be signed by the student, not by a parent, guardian or agency.

**2. SUBMIT EDUCATIONAL DOCUMENTS**

- Official university transcript(s) from all higher education institutions attended. Be sure to bring an updated official transcript from your current institution with most recent semester grades posted with you to UIW.

**3. SUBMIT OFFICIAL PROOF OF ENGLISH PROFICIENCY**

- TOEFL: 79 (via ETS, institution code 6303)
- IETLS: 6.5 (photo copy will suffice)
- Duolingo English Test: 105
- TOEIC: 650 (contact Testing Center)
- PTE Academic: 53
- CAE (Cambridge Advanced): C1

**4. SUBMIT IMMIGRATION AND FINANCIAL REQUIRMENTS**

- Be sure to include a copy of your passport and any visa you hold.
  - Exchange Student Proof of Finances worksheet
  - Official/original bank statement or letter
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By submitting this application, I certify that I am seeking to enroll at the University of the Incarnate Word and that the information which I have given on these pages is complete and true to the best of my knowledge. I agree that if accepted for admission, I shall comply with all the rules and regulations of the University which may be in effect or which shall be put into effect while I am a student.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## GDPR REGULATIONS (ONLY FOR APPLICANTS LOCATED WITHIN THE EUROPEAN UNION)

I understand that I am authorizing UNIVERSITY OF THE INCARNATE WORD (UIW) to collect personal information about me for the express purpose of interacting with UIW and for the admission application process. Furthermore, I understand that the type and amount of information that is collected about me by UIW is governed by the choices of the institution that is offering the service to its students, faculty, and clients.

In the case that I wish to withdraw my consent for my personal information to be retained, I understand that I will need to contact the site administrator.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

# EXCHANGE STUDENT APPLICATION FOR ADMISSION

## University of the Incarnate Word

### PERSONAL

Name: Type your full name as it appears on official documents such as school records, test scores, national identity papers, passport, etc.

Family Name \_\_\_\_\_ First or Given Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Indicate any other family name which appears on any of your documents: \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Male  Female  Marital Status \_\_\_\_\_ Native Language \_\_\_\_\_  
day month year

Country of Citizenship \_\_\_\_\_ Country of Birth \_\_\_\_\_ City of Birth \_\_\_\_\_

Country of Legal Permanent Residence \_\_\_\_\_

Have you had a US visa before: YES  NO  If yes, please state visa category \_\_\_\_\_ and dates \_\_\_\_\_

Permanent Address in your home country  
Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_

Country: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Mailing Address (if different from permanent address)  
Address: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_

Country: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Cell Phone # ( ) \_\_\_\_\_

Alternate Telephone ( ) \_\_\_\_\_

Email Address \_\_\_\_\_

How did you first learn about the University of the Incarnate Word? \_\_\_\_\_

Ethnicity:  Hispanic or Latino  
 Non-Hispanic

Race: (select one or more)  
 American Indian or Alaska Native  
 Asian  
 Black or African American  
 Native Hawaiian or other Pacific Islander  
 White

Ethnicity/Race Definitions:

Ethnicity: Hispanic or Latino is defined as person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race

American Indian/Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American: A person having origins in any of the black racial groups of Africa.

Native Hawaiian or other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White: A person having origins in any of the original peoples of Europe, the Middle East or North Africa.

## EDUCATIONAL HISTORY

Universities you have attended (or are attending at present):

Name & Location	From (month/year)	To (month/year)	Degree received

## ENROLLMENT INFORMATION

I am applying for 20\_\_  Fall (August – December)  Spring (January – May)

Name of Sister School \_\_\_\_\_

Duration of Exchange:  One Semester  Two Semesters

Has our Coordinator of Sister School Partnerships received official notification from your school representative?

YES  NO

**Field of Study :** \_\_\_\_\_

## ENGLISH PROFICIENCY SCORES

Please check which test you have taken and list the score:

TOEFL Yes  No  Score \_\_\_\_\_ Date \_\_\_\_\_

IELTS Yes  No  Score \_\_\_\_\_ Date \_\_\_\_\_

TOEIC Yes  No  Score \_\_\_\_\_ Date \_\_\_\_\_

PTE Yes  No  Score \_\_\_\_\_ Date \_\_\_\_\_

CAE Yes  No  Score \_\_\_\_\_ Date \_\_\_\_\_

*\*Official test results must be sent to UIW by the testing center, with the exception of IELTS and CAE.*



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## ESTIMATE FEES & EXPENSES

Immigration Regulations require students under J-1 Exchange Visitor Visa's to give proof of their financial resources to cover their educational and living expenses while studying in the U.S. These expenses include fees, books, supplies, living expenses, health insurance and miscellaneous expenses (travel, recreation, toiletries, telephone, etc.) UIW may wish to require an advance deposit of tuition and perhaps living expenses as well before issuing the Certificate of Eligibility (Form DS-2019).

The following chart indicates the amount you must provide in proof of financial support in order to be issued a Certificate of Eligibility.

### Amount for the Exchange Program Year 2021-2022:

	One Semester	Two Semesters
<b>Fees</b>	<b>\$1,800</b>	<b>\$3,600</b>
<b>Living Expenses</b>	<b>\$6,561</b>	<b>\$13,122</b>
<b>Miscellaneous Expenses</b>	<b>\$1,995</b>	<b>\$3,990</b>
<b>Total Expenses</b>	<b>\$10,356</b>	<b>\$20,712</b>

### Need for Additional Funds:

The student is responsible for additional expenses during these events:

- Travel between your home country and the United States
- Each dependent accompanying you in the U.S. (see previous page for estimates)
- Tuition, living and miscellaneous expenses during Summer School
- Living and miscellaneous expenses during Winter Break

## PROOF OF FINANCIAL SUPPORT

Funds may come from any dependable source, to include: personal funds, your immediate family, scholarships, fellowships, or sponsoring agencies. Documentation of scholarships and fellowships may be in the form of an official award letter from the school or sponsoring agency.

Documentation of personal or family funds must be on bank letterhead stationery that must include the following information:

- Address and phone number of the issuing bank
- Name and signature of the issuing bank official
- Indication on how long the account exists
- Current balance and average balance over a minimum of the previous six months
- Indication of the currency

Documentation of financial support should be issued in English and must be official. Bank letters will be accepted if not older than six month at the time of the application. Funds invested in the stock market cannot be accepted as coming from a dependable source due to the possible fluctuation of their value.

# FINANCIAL SUPPORT WORKSHEET

(Indicate in U.S. dollars)

Please use this worksheet to layout all sources of financial support for your first year of study:

- From Personal Savings \$ \_\_\_\_\_  
(Enclose Bank Statement signed by Bank Official)
- From Family \$ \_\_\_\_\_  
(Complete the **Affidavit of Support** below this form.)
- From other sources \$ \_\_\_\_\_  
(Governmental Agency, Cooperative Agreement between your school and the University of the Incarnate Word, etc.) Please specify:

.....  
.....

**TOTAL SUPPORT FOR EXCHANGE TERM/YEAR AT UIW \$** \_\_\_\_\_

## AFFIDAVIT OF SUPPORT

(to be completed by sponsor)

Date \_\_\_\_\_

I certify that I am able, willing, and do promise to provide \_\_\_\_\_, Student's name  
with the minimum amount of \$ \_\_\_\_\_, payable in U.S. dollars, for his/her fees and  
living expenses during his/her Exchange Program beginning \_\_\_\_\_ **and**  
Date  
**as long as he/she is enrolled at the University of the Incarnate Word.**

Evidence of my financial resources in the form of a bank statement accompanies this affidavit of support. Failure to provide the bank statement may also delay or prevent the issuance of certificate of eligibility (DS-2019).

\_\_\_\_\_  
Print Name of Sponsor (Mr./Ms.)

\_\_\_\_\_  
Signature of Sponsor

\_\_\_\_\_  
Relationship (Mother/Father/Aunt/Uncle/Friend)

\_\_\_\_\_  
Address of Sponsor

\_\_\_\_\_  
City, Province, Country, Zip Code