

FOR OFFICE USE ONLY:

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# THE UNIVERSITY OF EDINBURGH

College of Humanities and Social Sciences  
Visiting Student Application Form



www.hss.ed.ac.uk

Adobe reader 6.0.2 or above is required for this form to work interactively. Get it at [www.adobe.co.uk](http://www.adobe.co.uk).

Please complete this form electronically then print and sign. If this cannot be done please print and complete in block capitals with black ink.

International students deadline is 1st July for September entry or 1st November for January entry. EU students must apply for the full academic year. The deadline for application is 1st March. If you are an exchange or an ERASMUS student do not complete this form. You must contact your Study Abroad Advisor for advice.

Duration of study:  Semester 1  Semester 2  Full Year See note 8 for semester dates

Are you applying through Arcadia or IFSA Butler?  Arcadia  Butler  Independent

Name of your home university: \_\_\_\_\_

Major / intended major discipline: \_\_\_\_\_

Gender:  Male  Female

First name: \_\_\_\_\_

Family name: \_\_\_\_\_

Country of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_

Country of domicile: \_\_\_\_\_

Birth date e.g. 01-JAN-1981: \_\_\_\_\_

Current Address: \_\_\_\_\_

Permanent Address if different: \_\_\_\_\_

Institute For Study Abroad  
Butler University  
1100 W. 42nd St. Ste #305  
Indianapolis, IN 46208

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Butler University  
1100 W. 42nd St. Ste #305  
Indianapolis, IN 46208

Tel: (317) 940-4224

Tel: SAME

Valid Until: DEPARTURE

E-mail: LWALLMAN@IFSA-BUTLER.ORG

Current year of study (e.g. 1,2,3 etc): \_\_\_\_\_

Cumulative GPA if applicable: \_\_\_\_\_

Course choice at the University of Edinburgh (see note 2). The normal academic load is 120 credits per year or 60 per semester. Please include alternative course choices.

	Course Code	Course Name	List in order of preference Mark essential courses with an asterisk *	Number of Credits	Office Use Only
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					

Is English your native language?  Yes  No

If not, please enclose your IELTS / TOEFL certificates (see note 5).

University contact we can send your transcript to (a copy will also be sent to your permanent address):

Name: RUTH CASEY  
IFSA - BUTLER

Address: GROUND FLOOR  
26 RUTLAND SQUARE  
EDINBURGH  
SCOTLAND  
EH1 2BW

Please list the courses you are currently taking at your home institution:


Disability code (see note 3): \_\_\_\_\_

In what format do you require information?  Large print  Audio tape  Braille  Computer disc

If you require specific arrangements or facilities, please detail these on a separate sheet and enclose with your application.

Do you have any criminal convictions (see note 4)?  Yes  No

If yes, please give details on a separate sheet and enclose with your application. If you have any concerns you can contact us prior to application. Please note that spent convictions and convictions for driving / minor offences are unlikely to be considered relevant to the admissions decision.

How did you hear about the University of Edinburgh?

- |  |   |
|--|---|
| <input type="checkbox"/> Browsing the web        | <input type="checkbox"/> Recommendation from your school / university           |
| <input type="checkbox"/> Advertisement           | <input type="checkbox"/> Reading a University of Edinburgh prospectus           |
| <input type="checkbox"/> Personal recommendation | <input type="checkbox"/> A member of our staff visited your school / university |

How will you pay your tuition fees?

- I will pay my own fees to University of Edinburgh  
 My University / Agent will pay my fees to University of Edinburgh

Please confirm which of the documents you have enclosed; all are required to complete your application:

- Academic Transcript  Personal Statement  Letter of Reference

Please confirm that you have read and understood the notes accompanying this application

Please confirm that you have supplied a university contact address for your transcript to be sent to

I certify that the information I have provided here is true and correct and understand that the University has the right to withdraw any offer made or cancel registration if any of these statements prove to be incorrect. I accept full responsibility for the information I have provided on this form.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_