

APPLICATION FORM ACADEMIC YEAR ____ / ___ INTERNATIONAL STUDENTS UNDERGRADUATE DEGREES (1ST CYCLE)

CANDIDATE		
Full Name:		
Address:		
Post Code:	Country:	
Nationality/Nationalities:		Date of Birth:
Passport no.:	Issue Date:	Valid Until
Tel:	E-mail:	
apply for the following (ındergraduate degree	programme(s) (in preference orde
1st option		
2nd option		
3rd option		
	if applicable):	
Language test to be taken at DIVIAIA (II	applicable):	
	SUPPORTING DOCL	JMENTS:
☐ Certified declaration issued be proving that the secondary of for courses equivalent to the education issued by a compact ☐ Documentary proof of the kn ☐ Proof of knowledge of the lared ☐ Sworn declaration of the app	ualification held, obtained in that country, one to which the application is made (OF tent Portuguese body); owledge of the admission exam subject reguage in which the course is taught (who licant stating that s/he is not a EU nation which the course is taught (who licant stating that s/he is not a EU nation which the course is taught (who licant stating that s/he is not a EU nation).	nuntry of origin, translated into English or Portuguese, , is sufficient to enter official higher education in the country R a certificate of equivalence to Portuguese secondary matters;
education programme. - For application proced enrollment/ matriculation, s	ures, sudents are allowed to submit cert tudents must submit the original docume postille from the competent authority in t	grading scale used and the final grade achieved in the sified copies of the necessary documents electronically. For ents authenticated by a Portuguese consular or diplomatic he state in which the document was issued). Whitout these,
	Candidate's signatur	re
	(as in Passport/ ID documen	t provided)

Date: ___/___