



VISITING STUDENT APPLICATION

Applications should be submitted to the Study Abroad Office at studyabroad@aun.edu.ng

STUDENT INFORMATION

First Name _____ Middle name _____ Last Name _____

Home Address _____

Postal Code _____ City _____

State _____ Country _____

Mobile Phone _____ Home Phone _____

Email Address _____

Birthdate _____ City _____

State _____ Country _____

CURRENT INSTITUTION

School Name and Address _____

Contact at School _____

Level of Study (Undergraduate or Graduate) _____

Year _____ Major _____

Minor _____ CGPA _____

Desired Course of Study at AUN (refer to catalog) _____

Semester _____ Year _____

Student Signature _____ Date _____

PLEASE ATTACH THE FOLLOWING ADDITIONAL DOCUMENTS TO THIS APPLICATION:

- OFFICIAL TRANSCRIPT (SEALED)
- LETTER OF INTENT FOR STUDYING AUN (300 WORDS OR LESS)
- LETTER OF SUPPORT FROM DEPARTMENT CHAIR
- PHOTOCOPY OF PASSPORT
- FOUR PERSONAL PASSPORT PHOTOS