



Harvard Exchange/Consortium Programs Application

Deadline Fall 09/AY 09-10: rolling until March 1

Deadline Spring 09: October 1

 Fall / Spring Semester 20

Please check the program that you are applying to:	
<input type="checkbox"/> SCIENCES PO	<input type="checkbox"/> Paris, France
	<input type="checkbox"/> Other campus:
<input type="checkbox"/> FIPSE NORTH AMERICAN SOCIAL MOBILITY	<input type="checkbox"/> Canada: University of British Columbia
	<input type="checkbox"/> Canada: University of Montreal
	<input type="checkbox"/> Mexico: UDLA-Puebla
	<input type="checkbox"/> Mexico: Colegio de Mexico
<input type="checkbox"/> BOCCONI	Milan, Italy
<input type="checkbox"/> KILLAM	University:
<input type="checkbox"/> UPPSALA	Uppsala, Sweden

Personal Information	
Student Name:	Harvard ID number:
Email Address:	Class year:
Permanent Address:	
Campus Address:	
Phone:	Date of Birth:
Passport Number and Country of Issue:	Passport Date of Expiration:
Academic Information	
Concentration:	GPA:
Secondary Field:	
Emergency Contact Information	
Name + Relationship to Student:	
Address:	
Phone:	Email Address:

Statement of Purpose (300 words; below or on separate page)

Please describe your reasons for wishing to study at the institution of your choice; list all courses you feel have provided you with relevant background for this program; if applicable, describe your proficiency level in the language of instruction.

Applicant Signature

I certify that the information disclosed in this application is true to the best of my knowledge. [NB: Your signature indicates your permission enabling us to share with the program director any information that may be relevant to your participation on this program.]

(signature)

(date)