



Manila Central University

EDSA, Caloocan City 1400, Metro Manila, Philippines

www.mcu.edu.ph

Student Exchange Program (SEP)

OUTBOUND Exchange Student APPLICATION FORM

UNIVERSITY APPLYING FOR:	COUNTRY:
SEMESTER ABROAD: <input type="checkbox"/> FIRST <input type="checkbox"/> SECOND <input type="checkbox"/> SUMMER SESSION <input type="checkbox"/> OTHERS _____	

I. PERSONAL INFORMATION

Last/Family Name:	First/Given Name:	2" x 2" RECENT ID PICTURE (COLORED)
Middle:	Nickname:	
Title: <input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Ms. <input type="checkbox"/> Other _____	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth: MM / DD / YYYY	Place of Birth:	
Civil Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others _____	Nationality:	Citizenship:
Residential Address:	E-mail Address:	
Passport Number:	Passport Validity: MM / DD / YYYY	Tel. No.: Mobile No.:

In Case of Emergency

Person to Contact:	Relationship with Student:
Residential Address:	
E-mail Address:	
Home Tel. No.:	Mobile No.:

II. EDUCATIONAL BACKGROUND

POST GRADUATE	University:	
	Complete Address:	
	Degree:	
	Year level:	CGPA:
	Honors and Awards:	

UNDERGRADUATE	University:	
	Complete Address:	
	Degree:	
	Year level:	CGPA:
	Honors and Awards:	

HIGH SCHOOL	University:	
	Complete Address:	
	Degree:	
	Year level:	CGPA:
	Honors and Awards:	

III. EXTRA-CURRICULAR INVOLVEMENTS

Year	Organization	Responsibilities

IV. LANGUAGE PROFICIENCY

Language 1: FILIPINO	Good	Fair	Poor
Speaking			
Reading			
Writing			

Language 2: ENGLISH	Good	Fair	Poor
Speaking			
Reading			
Writing			

Language 3:	Good	Fair	Poor
Speaking			
Reading			
Writing			

Language 4:	Good	Fair	Poor
Speaking			
Reading			
Writing			

Language 5:	Good	Fair	Poor
Speaking			
Reading			
Writing			

V. WORK EXPERIENCE

Company/Location	Position	Period

VI. STUDY ABROAD EXPERIENCE

Fill out the necessary details below. Please check [/] your answers in the boxes provided.

		YES	NO
A. Have you ever applied for an exchange program at Manila Central University?			
<i>If yes, in what program?</i>	Duration of the program:		

		YES	NO
B. Have you ever been abroad to represent Manila Central University?			
<i>If yes, in what program(s)?</i>			
Title of the Program	Date		

		YES	NO
C. Do you have family members or relatives in the country you are applying for a Student Exchange Program?			
<i>If yes, who are they?</i>			
1.			
2.			
3.			
4.			
5.			

VII. PARENT'S CONSENT (attached)

VIII. STUDENT DECLARATION (attached)

IX. ESSAY (Maximum of 500 words)

A. What are your motivations in applying for Student Exchange Program?

B. Why should the Office of the Dean of the College of Medicine send you abroad for Student Exchange Program?

C. After your Student Exchange Program, what are your immediate plans upon your return to Manila Central University?

IMPORTANT INSTRUCTIONS:

1. For *Parent's Consent* and *Student Declaration Letter*, please refer to the attachments after this form.
2. Additional documents attached to the Outbound Application Form:
 - a. Copy of grades printed from AIMS
 - b. Updated Curriculum Vitae
 - c. Photocopy of Enrollment Form for the current term
3. Submit **3 sets** in a **long brown envelope with the following label:**

**LAST NAME, FIRST NAME MIDDLE NAME
ID NUMBER/COLLEGE
E-MAIL & MOBILE NUMBER
UNIVERSITY APPYING FOR
SEMESTER and A.Y.**

Submit application documents at:

COLLEGE OF MEDICINE
2nd floor, Administrative Bldg.,
Manila Central University
Epifanio delos Santos Avenue (EDSA)
Caloocan City 1400

*****For SUCCESSFUL APPLICANTS:**

Be ready with the following: (Original copy)

1. Certificate of Good Moral Character
2. Letter of Good Standing
3. Two (2) Recommendation Letters
 - a. Department Chairperson
 - b. Department Coordinator



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Parent's Consent Letter

I, _____ (*name of parent*), am allowing my son/daughter _____ (*name of son/daughter*) to apply for the Outbound Student Exchange Program of the Manila Central University to be held from _____ to _____ (*duration of the program*) at _____ (*name of Host University*).

I understand that he/she will abide by the terms stipulated in the Memorandum of Agreement between Manila Central University, Philippines, and _____ (*name of Host University*), _____ (*country*).

In case of an emergency situation that may happen to my son/daughter during the period of the Outbound Program, I fully agree to waive any responsibility on the part of Manila Central University and _____ (*name of Host University*). Instead, I shall be held liable for the concern.

The information that I have written above is accurate and complete.

Signature over printed name of Parent/Guardian

Contact Number:

E-mail Address:

Date Signed:



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Student Declaration

I, _____ (*full name of student*), acknowledge that I understand and agree on the following terms and conditions covering my application and participation in the Manila Central University Student Exchange/Outbound Program.

Kindly check [/] the box to indicate that you have read, understood, and agree to the following terms and conditions of the MCU Student Exchange Program:

All the information I have provided in the Outbound Exchange Student Application Form are correct and complete;

I acknowledge the Manila Central University may vary or cancel any initial decision it makes if the information I have given is found to be incorrect and/or incomplete;

I am responsible in providing all documents required for my application as Outbound Exchange Student;

I authorize Manila Central University to obtain further information where deemed necessary;

I agree to comply with the rules governing admission and enrollment in the Host University;

I am responsible for the prompt payment of any related fees to the program I am applying for;

I shall report immediately within two weeks after my Outbound Program to the Office of the Dean and Electives Officer-in-Charge for a debriefing session and submission of the Outbound Program Survey.

Signature over printed name of student
Date Signed: