**Please fill in this form electronically and email it to** [**europe@viu.ca**](mailto:europe@viu.ca) **to facilitate the application process.**

**Student Name**:            

*Family Name First name Middle Name*

**Home Address***:*

*Numer and Street Name*

*City and Postal Code*

*Country*

**Telephone:**

**E-Mail:**

**Date of Birth:**

*Month Day Year*

**Gender***:* Choose an item.

**Name of school/university/institution currently enrolled at:**

**Program at VIU:**Choose an item.

**Study Abroad for:** *One Semester*  *Two Semesters*

**Start Date:**

*Month Year*