



**Program application form 2005
Centro Internacional de Lengua y Cultura**

Admission procedures

The following items must be submitted to UDLA for consideration as a foreign CILC (Centro Internacional de Lengua y Cultura) Spanish program student:

1. Completed UDLA application form (please print, use pen only)
2. Full -coverage International Health Insurance (please mail a copy and bring original with you)
3. Spanish placement test <http://www.udlap.mx/cilc>

For those students who will require an official UDLA transcript:

1. Notarized copy of ID page of passport (sealed by a notary) or birth certificate
2. Original transcript

For those students who will not require an official UDLA transcript:

1. Simple copy of ID page of passport

Late or incomplete documentation will not be accepted. UDLA does not accept copies or faxed copies of documents. Please send your documents via express mail (UPS, DHL, FedEx) to:

Universidad de las Américas, Puebla
Centro Internacional de Lengua y Cultura
Santa Catarina Mártir s/n
Cholula, Puebla 72820
MEXICO

Deadlines

Documentation must be received before:

Service Learning Program	April 15 th , 2005
Summer Immersion Program	April 29 th , 2005
Spanish for Health Professions	April 29 th , 2005
Business Program	April 29 th , 2005
Fine Arts Program	April 29 th , 2005

Student information

Last Name Middle Name First Name

Date of birth _____ Place of birth _____
Day Month Year State Country

Gender M F Civil Status Single Married Divorced Widow

Email _____ Nationality _____

Permanent address

Street and number

City State Country Zip Code

Telephone number & area code

Name of parent or guardian _____

Date of birth (statistic information) _____
Day Month Year

In case of emergency please call

Person to be contacted _____

Telephone number & area code _____

Have you been previously registered at the UDLA, P? Yes No

If your answer is affirmative, what was your student ID number? _____

Academic information

Official name of the current or last institution _____

City _____ State _____ Country _____ Zip Code _____

Department to contact for Academic inquiries _____

Person to contact for Academic inquiries _____

Telephone number & area code

Fax number & area code

Program to attend

Summer Immersion Spanish for Health Professions

Business Fine Arts Service Learning

Summer Seminar
for Spanish Teachers

I understand that the fundamental principle of this institution is the right to academic freedom, both in teaching and learning, for only under those conditions is true knowledge attainable. The cornerstone of academic freedom is the integrity of each of the members of the university community. Both students and teachers have the responsibility to uphold this freedom. Therefore, any dishonesty is of grave concern to this institution. Individual moral responsibility is obligatory for all university community. The violation of this responsibility will not be tolerated by the institution and may be punished by discharge.

I certify that all information provided in this application is true

Student's signature _____

Date _____