

KEIO-UNIVERSITY Japan incoming

20.. - Application Form



MEDIZINISCHE
UNIVERSITÄT
INNSBRUCK

International Relations Office Medical University of Innsbruck Susanne.Wolf@i-med.ac.at	
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PERSONAL DATA

Applicant (last and first name)		
Date of birth		
Current address		
Telephone/ Mobile phone number		
Home Institution		
Email		
Passport (number and date of expiration)		
Nationality		
Place of birth		
Marital status		
Gender	male	female

CLINICAL ELECTIVE (at Medical University of Innsbruck)

	1 st choice	2 nd choice	3 rd choice
Subject			
Month			
Planned period of stay (1 st and last day)			

LANGUAGE SKILLS

	English	German	Other language	Other language	Other language
Excellent	<input type="checkbox"/>	<input type="checkbox"/>			
Good	<input type="checkbox"/>	<input type="checkbox"/>			
Basic	<input type="checkbox"/>	<input type="checkbox"/>			

- All clinical electives start on the **1st Monday of the month at 8:00 am**. Please arrange everything (e. g. flight) to ensure that you'll be able to be at the Department of your choice on time.
- The hospital will provide doctor's white coats – you should bring all other things (e. g. white trousers and shirts).
- An international insurance (health and accident) is compulsory for the period of your stay in Austria. It has to be valid for Austria and for the whole duration of your stay. The relevant documents have to be sent to the International Relations Office prior to your arrival.
- Please consider, that some subjects may not be available during the period intended.
- The application documents have to be passed on to the International Relations Office at least **3 month prior to arrival**.
- Basic German is MINIMUM! English B2
- Vaccination certificate and an extract from criminal record
- VISA: Regarding the visa, please take care of the students themselves or contact the Foreign Ministry

Data protection regulation:

I agree that all personal data submitted to us during the application process will be automatically stored, processed and used by the Medical University of Innsbruck for the purposes of program administration and evaluation. You can withdraw your consent at any time.

Yes No

Date:

Signature:

APPLICATION DOCUMENTS (please attach)

Proof of language skills

CV (english)

Passport (copy)

Insurance (copy)