**Additional Form for Exchange students**This form must be filled out and uploaded to your online application along with all other required documents

Full name Click to edit.

Applicantion number Click to edit

Dates at NTNU From Click to enter a date To Click to enter a date.

Study level Choose one

|  |  |
| --- | --- |
| Program | Choose one. |
| Home institution | Click to edit |
| Faculty at home institution | Click to edit. |
| Program of Study | Click to edit. |
| Years of study you have completed at your home institution | Click to edit. |

|  |  |
| --- | --- |
| Contact at home institution | Click to edit |
| Contact’s e-mail address | Click to edit |

Do you wish to be considered for student housing? Choose one

*Please note that due to capacity issues, NTNU cannot guarantee that all students will be offered housing through Sit. To be considered for student housing you will need to choose ‘yes’ in this form. For more information, please see our web pages.*

*If you want to be considered for student housing, please be aware that the following information about you will be forwarded to Sit: Full name, email address, nationality, sex, and period of your intended stay.*

Are you nominated for a Double Degree within the TIME-network? Choose one

Do you have special needs? Choose one
- If yes, please specify: Click to edit.

*We ask for this information to know whether you will need to be referred to NTNU’s Special Needs Services and Sit Housing. This information will only be used to plan the adaptation measures required to give students universal access. Note that applicants with any form of disability are treated on an equal basis to all other applicants. If you do not wish to state information about any disabilities through this form, you are welcome to contact either your contact officer at the International Office, or the NTNU Special Needs Services directly.*

|  |  |
| --- | --- |
| Emergency contact |  |
| Name | Click to edit |
| Address | Click to edit |
| Phone number | Click to edit |
| E-mail | Click to edit |

If a project or thesis is selected and contact with a supervisor at NTNU is established, please indicate the name of the academic at NTNU

|  |
| --- |
| Click to edit |

Comments:

|  |
| --- |
| Click to edit |

**Disclaimer:**

By uploading this form to Søknadsweb, you agree to let NTNU store this information about you. Information given in this form will only be used for the application process, or in the case that any emergency will occur during your stay and we need to contact your next of kin.

Some information might be sent to other relevant NTNU affiliated entities as described in the form above, to aid in the admission and relevant student welfare services if applicable.