

BAR-ILAN UNIVERSITY
Faculty of Law – The International Exchange Program
Ramat-Gan, Israel
Tel: 972-3-5318415 Fax: 972-3-7384044 e-mail: Exchange.Law@mail.biu.ac.il

APPLICATION FORM

1. Semester _____ Year _____

2. Identity Card and/or Passport

_____ I have an Israeli ID card with the following no. _____

_____ I have a foreign passport from: _____ (Name of country)
no. _____

3. Full Name _____

4. Mailing Address abroad

Telephone: _____ Mobile phone: _____

E-mail (mandatory):

5. Gender

_____ Male _____ Female

6. Date of Birth

___/___/___

7. Country of Birth: _____

8. Marital status: _____ Single _____ Married _____ Divorced _____ Widow

9. Civilian status

_____ I am an Israeli citizen

I am a tourist since _____/_____/_____

10. Father's First Name _____ Country of Birth _____

11. Mother's First Name _____ Country of Birth _____

12. TOEFL Exam (If the language of the partner institution is not English)

___ I have taken/ ___ will take the TOEFL exam on: Date _____

Score: _____

13. Academic studies

I am currently studying towards the following academic degree ___ B.A. ___ M.A.

In the Law School of _____ (University) Year No. _____

___ I have the following degree ___ B.A. ___ M.A.

In _____ From _____

14. Write a few words about yourself

I declare that the above details are true and should I get accepted to the Exchange Program I promise to abide by all the rules and decisions of Bar Ilan University and its administration.

Date: _____ Applicant's signature: _____

DOCUMENTS REQUIRED

The following documents should be attached to your application:

1. Two recent photographs.
2. Copy of first page of passport or ID card.
3. Certificate of TOEFL results.
4. If you have studied partial degree studies, please attach certified records.
5. If you have a B.A. degree, please attach a copy of your Diploma.

All documents should be sent to the following address:

The Exchange Program (Students Office – Ms. Ortal Shemesh)

Faculty of Law
Bar-Ilan University
Ramat-Gan 52900
Israel

Student Exchange/Visiting Student Admission Form

Academic Year:

Visiting Student Exchange Student

1. STUDENT'S PERSONAL DATA		PHOTO
Last Name		
Previous Last Name		
First Name		
gender	<input type="checkbox"/> Male <input type="checkbox"/> Female	
Date of Birth (dd/mm/y)		
CITIZENSHIP:		
I have an Israeli ID card with the following number:		
I have a foreign Passport from (country)		Number:
CONTACT INFORMATION ABROAD		
Mailing Address abroad:		
Phone number (with intl. area code)		Mobile Phone number
CONTACT INFORMATION IN ISRAEL		
Mailing Address in Israel		
Phone number		Mobile Phone number
Email Address		