

Exchange Program Nomination Agreement

Legal Name:	
UCID:	
Major/ Minor:	
Host Institution:	
Exchange Term:	○ Fall 20 ○ Winter 20 ○ Summer 20
	○ Academic Year 20/20 Southern Hemisphere Academic Year 20
I understand that I institution, conditi as specified below Additional conditions: I agree to: Read all er manner. Make the Apply to m Authorize Attend all Purchase h COVID-19. insurance Submit my passport co Fully prepasystems, h require pa I understa Exchange h that needs I understa of others, I understa	Academic Year 20/20 Southern Hemisphere Academic Year 20 have been nominated to participate in the exchange program at the above host onal on my continued academic success and any following additional conditions,
return ear	ly, or having my program canceled before departure.
Signature	Date