How to apply for a research exchange through the student exchange program

1. Please send us an invitation letter by email (according to the email addresses below) from your research supervisor, a professor/researcher from Université de Montréal must first agree to supervise your research. The letter must specify the exact dates of your research exchange as well as the codes of the research credits to which you will be registered with a full-time status (12 credits minimum for undergraduate students and 6 credits minimum for graduate students). Registration to these credits does not entail any attendance to courses.

   Caroline Téhard
   Student Mobility Advisor
   Europe and Middle East
   caroline.tehard@umontreal.ca

   Student Mobility Advisor
   Americas, Asia-Pacific and Africa
   aff-int@umontreal.ca

2. Submit our online application (this link will be sent to you once we receive your letter of invitation).

3. Your application must contain all of the following documents in the order below:
   - This document duly signed;
   - The letter of invitation from your research supervisor at Université de Montréal;
   - A letter of intent with the academic objectives that you wish to achieve;
   - A copy of your official academic transcripts, which must include all the courses taken to date as well as your most recent grades;
   - A letter of recommendation from the home university’s Academic Head, Advisor or other appropriate authority;
   - A copy of a single document listing your name and your parents’ names (e.g. birth certificate or family record book).

   Please send your application to one of the following addresses:

<table>
<thead>
<tr>
<th>Express mail (FEDEX, DHL)</th>
<th>Regular mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>Université de Montréal</td>
<td>Université de Montréal,</td>
</tr>
<tr>
<td>Direction des affaires internationales</td>
<td>Direction des affaires internationales</td>
</tr>
<tr>
<td>3744, rue Jean-Brillant, bureau 581</td>
<td>Pavillon 3744 rue Jean-Brillant</td>
</tr>
<tr>
<td>Montréal (Québec) H3T 1P1</td>
<td>C.P. 6128, succursale Centre-ville</td>
</tr>
<tr>
<td>CANADA</td>
<td>Montréal (Québec) H3C 3J7</td>
</tr>
<tr>
<td></td>
<td>CANADA</td>
</tr>
</tbody>
</table>

   Please note that no financial assistance is associated with this program.

   AUTORISATION AND SIGNATURE

   I authorize the universities to release information to the appropriate authorities, if applicable, where such information may be required for or may facilitate the issuing of permits required to enter and stay in the host country, in accordance with applicable laws. I agree to abide by the rules and respect any decision taken by the university. I declare that the information provided above is complete and accurate.

   ________________________________  ________________________________
   Signature                        Date