



MINISTÉRIO DA EDUCAÇÃO
UNIVERSIDADE FEDERAL DE SANTA MARIA – UFSM
GABINETE DO REITOR
SECRETARIA DE APOIO INTERNACIONAL



UFSM IN

STUDY PLAN

Student's name:

E-mail:

Country:

Home university:

Course/department:

Coordinator at UFSM:

() Undergraduate () Especialization () Masters () Doctorate () Postdoctorate

Duration: ___/___/_____ to ___/___/_____

CLASSES/ACTIVITIES TO BE HELD AT UFSM:

Sem./year	(Home University)		UFSM (Host institution)	
	Code/Name of the discipline	Workload Credits	Code/Name of the discipline	Workload Credits
I/20__				
II/20__				

Contact person at UFSM:

Observations:

Applicant's signature

UFSM Coordinator's signature and stamp

___/___/___
Date

REQUIRED DOCUMENTS

- | | |
|---|---------------------------|
| 1. Letter of recommendation/presentation from home university | Graduation/Postgraduation |
| 2. Copy of transcripts of records | Graduation/Postgraduation |
| 3. Proof of school enrollment | Graduation/Postgraduation |
| 4. Study plan to be held at UFSM | Graduation/Postgraduation |
| 5. Copy of the passport | Graduation/Postgraduation |

UNIVERSIDADE FEDERAL DE SANTA MARIA (UFSM)

Secretaria de Apoio Internacional (SAI)

Cidade Universitária Prof. Doutor José Mariano de Rocha Filho

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