

Application for the later part of a study programme one/two year programmes

| Applicants personal information | ı (* = mandatory) | Send form by email to |
|---------------------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------------------|
| Personal ID-no* (yymmdd-xxxx) | | antagning@his.se |
| Given name* | Sur name* | |
| Address* | | |
| Postal code * | City * | |
| Telephone-/mobile phone number | E-mail address | |
| | | |
| I want to apply to the following s (more information can be found on page 2) | | the following semester |
| ☐ Study programme starting from the autumn semester | | / starting from the spring semester |
| I apply to the following programme | | I have previously studied (state the programme and where you have studied it) |
| | | |
| I want to start semester number | | I have studied number of semesters |
| (at the earliest, you can apply to the secon | nd semester) | I have passed credits |
| Signature of applicant | | |
| Date * | Signature Send form by email to antagning@his.se | |
| _ | 1 | |
| Decision/Beslut | | |
| ☐ The application for admission is appro | oved/Ansökan om antagning me | edges |
| ☐ The application for admission is reject program avslås med hänvisning till institut | | nent on the second page of this form/Ansökan om antagning till sökt |
| ☐ The application for admission is appro | oved on the following condition/ | Ansökan om antagning till sökt program medges på följande villkor |
| | | |
| Date | | |
| Signature | | |
| | | |
| Clarification of signature | | |
| | | Registered in Ladok |
| ☐ Applicant ☐ Institution ☐ | | Date Sign |

Statement

| The statement must be based on an assessment of the applicant's chances to successfully complete the programme that the application concerns. If admission is possible only if certain conditions are met, these conditions must be stated below. The statement is to be returned to the admissions office, along with the attached documents. | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|----------|--|
| ☐ Admission is rejected (the motivation is stated below) | | | |
| □ Admission is granted without reservations | | | |
| ☐ Admission is granted provided that (see below) | | | |
| The applicant is to be placed in semester number | | from | |
| | | | |
| | | | |
| | | | |
| | | | |
| Date | Clarification of name | Position | |
| | | | |
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Information

Admission to the later part of a programme is only possible if there is a free place on the programme. Submitted applications that are incomplete are usually left unattended.

- Please fill in from which semester you would like to start the programme. Applications for the autumn semester must be submitted on June 1 at the latest, and applications for the spring semester on November 15 at the latest.
- Fill in what programme you want to apply to and from which semester you would like to start (from the second semester at the earliest).
- Fill in what programme you have already studied and how many semesters you have completed on this programme.

- Attach your upper secondary school grades.
- Attach a transcript of records from your previous university studies. If you are studying when you fill out the application, you must also attach a certificate of registration.
- Attach syllabuses (course plans) from the university courses that you have previously studied (not necessary if these studies have taken place at the University of Skövde).

Send form by email to antagning@his.se

Decision

We will notify our decision by email.

Appeal

If your application for the later part of a study programme is rejected because you do not fulfill the entry requirements you may appeal this decision to the Higher Education Appeals Board. The appeal must be in written form. In the appeal you should state the decision that you want to appeal, how you want it to be changed and your reasons for this. The appeal should be addressed to the Higher Education Appeals Board, but sent to the University of Skövde, Box 408, 541 28 Skövde. The appeal must be submitted to the University of Skövde within three weeks after you received the decision.

If your application is rejected because there are no vacancies on the study programme in question, this decision cannot be appealed.