Foreign students who wish to do an elective rotation at our University must be in their final of the medical career. The application form should be in the International Affairs office at least six months prior to the date of the rotation requested. Visiting students are limited to a maximum of four months. Acceptance into the program depends on completion of all requirements and availability of space.

REQUIRMENTS:

1- Recommendation, in writing, from the Director of Medical Curriculum of the applicant’s medical school. (English or Spanish)
2- Recommendation, in writing, from Dean of the applicant’s medical (English or Spanish)
3- Certified copy of medical school transcript from the beginning of the medical career (translated to Spanish)
4- Proof of being a last year student at your University
5- Submission of a completed application
6- Two photographs (4 x 4)
7- A letter of presentation stating the reasons why you wish to come to Argentina (in Spanish)
8- Personal Health insurance
9- Photocopy of Passport
10- Those students whose language is other than Spanish, must send a certificate with score of Intermediate or Advance of an official Spanish Test.
11- There is an Administration Fee of $ 400 (pesos Argentinos) that you must pay when you present yourself at the International Affairs office before the beginning of the elective.

Note: If accepted, we will send you a letter of acceptance to your home address. You must present this letter in person at the International Affairs Office, before the beginning of the elective; the letter must be sign by the Dean of your School of Medicine.

For additional information or questions please contact: relint@fmed.uba.ar

Complete and return application to: Universidad de Buenos Aires
Facultad de Medicina
Relaciones Internacionales
Paraguay 2155, Capital Federal
Argentina, 1121

I have read and understand all the application materials. I attest that the information given in the application form is accurate and true.

___________________________________                _____________
student’s signature                                                                                        date