



OFFICE OF THE RECTOR לשכת הרקטור

Date _____

To the Office of International Academic Affairs, Tel Aviv University

Full Name _____

Student ID _____

A full-time student at Tel Aviv University in the Faculty of Social Sciences
during the academic year _____

A candidate for student exchange during the First/second semester of
the academic year _____

At _____ University

I hereby commit to undertaking the following actions prior to my travel
to the host university.

- 1) Register and pay all fees to Tel Aviv University for the academic year in which the exchange will take place (in accordance with exchange student regulations)
- 2) Acquire the necessary health insurance for the entire period abroad as an exchange student.

Documents confirming these actions must be submitted to the Office of International Academic Affairs prior to travel abroad

Student's Signature _____