UNIVERSIDAD AUTÓNOMA DE CHILE

# Incoming Exchange Program Calendar — 2027-1

| Stage | Dates |
|---|---|
| Nomination period for incoming exchange students | September 7 – November 13, 2026 |
| Nomination confirmation and application form submission | By November 13, 2026 |
| Review and referral to academic units | November 13–27, 2026 |
| Notification of results and issuance of acceptance letters | From December 7, 2026 |
| Preparatory online orientation | December 21, 2026 |
| In-person orientation week | February 24–26, 2027 |
| Start of classes | March 2, 2027 (mandatory attendance is counted from this date) |
| Tentative end of classes | July 9, 2027 |

## 1. Nomination of incoming exchange students: September 7–November 13, 2026

The International Relations Office or the staff member responsible for outgoing student mobility at the applicant's home institution must send the formal nomination to the following email address:

• internacional@uautonoma.cl, copying eden.silva@uautonoma.cl.

Nominations will only be accepted from students at higher education institutions that have a valid student mobility agreement with Universidad Autónoma de Chile applicable to the relevant exchange period.

The nomination must include the following information:

- Student's first and last name.
- Student's institutional email address.
- Degree program or academic program pursued at the home university.
- UA degree program in which the student wishes to take courses (from the following list: Daytime Degree Programs).
- Home university.
- Name and email address of the person responsible for outgoing student mobility at the home university.

If the student comes from a non-Spanish-speaking country, the outgoing student mobility coordinator at the home institution is responsible for verifying that the student has a minimum Spanish proficiency level equivalent to B1.

An official language certificate is not required. Signing the Spanish proficiency declaration available here will be sufficient; through this declaration, the home institution certifies that the student has the Spanish proficiency level required to participate in the exchange program.

IMPORTANT: This call for applications only covers theoretical courses delivered in a classroom. It does not include courses involving fieldwork, clinical placements, internships, or professional practice. No places are reserved for international students in these types of activities.

## 2. Nomination confirmation and application form: by November 13, 2026

Once the nomination has been received, the mobility coordinator will confirm receipt and email the student the Application Form for the Incoming Exchange Program 2027-1.

## 3. Completing the application form: by November 13, 2026

The student must complete the application form by the established deadline and attach the following documents:

- Transcript of Records, including the courses taken at the home university.
- High-resolution passport-style photograph with a white background.
- Copy of a valid passport.
- Nomination letter issued by the home university.
- Student Commitment Letter, duly completed and signed (Annex 1).
- Medical Insurance Commitment, duly completed and signed (Annex 2).

The student must also select the campus, degree program, and courses they wish to take during the exchange. See here which campus offers each degree program.

To review the academic offerings, students should consult the information available under Daytime Degree Programs. To select courses, students must download the curriculum plan for the Universidad Autónoma de Chile degree program that most closely matches their home program and select courses from levels 1, 3, 5, or 7 only.

Example:




The proposed course selection is subject to review and approval by the relevant academic unit. To request course syllabi, students should email the list of selected courses, indicating the degree program and level, to eden.silva@uautonoma.cl.

## 4. Review and referral of applications to academic units: November 13–27, 2026

The mobility coordinator will review the submitted documents and refer applications to the relevant academic units for assessment of:

- Relevance of the selected degree or academic program.
- Availability and feasibility of the requested courses.
- Compliance with the applicable academic requirements.

The academic units will review the applications and requested courses and may provide comments or propose changes to the course selection.

## 5. Notification of results and issuance of acceptance letters: from December 7, 2026

The mobility coordinator will notify the student and their home university of the outcome. If the application is approved, an acceptance letter will be issued to formalize the student's participation in the Incoming Exchange Program 2027-1.

## 6. Preparatory online orientation: December 21, 2026

The mobility coordinator will invite all students admitted to the exchange program to an online meeting to welcome them and present the regulations they must follow during their exchange semester. Students will have an opportunity to ask questions about academic matters, immigration, and other issues prior to their mobility period. Attendance at this event is mandatory.

## 7. In-person orientation week: February 24–26, 2027

A free pick-up service from Santiago International Airport will be offered at the following times:

- February 23, 2027, at 1:00 p.m.
- February 24, 2027, at 1:00 p.m.

Students interested in this service must indicate their interest in the application form. Available places will be confirmed during the last week of January 2027.

## 8. In-person orientation activities: February 25–26, 2027

Attendance at the in-person orientation activities is each student's responsibility. During these sessions, the main academic regulations will be presented, and students will be able to meet with representatives of their respective academic units to review and confirm their course selection.

## 9. Start of classes: March 2, 2027

Mandatory attendance will be counted from March 2, 2027. If a student arrives after this date, absences accrued before their arrival will be counted in accordance with the applicable academic regulations. A minimum attendance rate of 60% is required to pass each course, as stated in this call for applications.

UNIVERSIDAD AUTÓNOMA
DE CHILE

**ANEXO 1: Carta de compromiso Intercambio Incoming**

**(adjuntar copia a formulario de postulación)**

**Convocatoria de Intercambio Incoming**

**Primer Semestre 2027**

**Carta de compromiso estudiantil**

**Ciudad de origen:** _____

**Fecha:** ____ / ____ / 2026

Yo, _____, titular del pasaporte N.º _____, estudiante regular de _____, de la Universidad _____, país _____, declaro que he leído y acepto las condiciones, los requisitos y los plazos establecidos en el *Factsheet Incoming 2027-1* y el calendario oficial de la convocatoria de la Universidad Autónoma de Chile.

Me comprometo a:

1. **Cumplir las normativas institucionales** de la Universidad Autónoma de Chile, incluidas las disposiciones sobre asistencia, puntualidad, conducta, convivencia e integridad académica, que serán informadas durante las inducciones virtual y presencial, en caso de ser admitido/a.
2. **Realizar mi intercambio durante la totalidad del semestre académico 2027-1**, cumpliendo las actividades académicas correspondientes, salvo causas justificadas que sean comunicadas a la universidad.
3. **Asumir los gastos asociados a mi estadía**, incluidos alojamiento, transporte, alimentación, seguro médico y cualquier otro gasto personal o de movilidad que no sea cubierto expresamente por la Universidad Autónoma de Chile u otras instituciones asociadas al programa.
4. **Cumplir la normativa migratoria chilena vigente**, siendo de mi responsabilidad gestionar los permisos y trámites necesarios para ingresar y permanecer legalmente en Chile durante todo el intercambio. Según mi situación migratoria, podría corresponderme tramitar una Residencia Temporal ante el Servicio Nacional de Migraciones (SERMIG) o ingresar con un Permiso de Permanencia Transitoria y gestionar oportunamente las prórrogas que correspondan antes de su vencimiento.

Declaro comprender que la Universidad Autónoma de Chile no gestiona ni garantiza la obtención o renovación de mis permisos migratorios, sin perjuicio de las obligaciones legales de la institución.

Confirmo que la información entregada en mi postulación es veraz y que conozco las consecuencias del incumplimiento de los compromisos aquí establecidos.

**Nombre completo:** _____
**Firma del/de la estudiante:** _____

UNIVERSIDAD AUTÓNOMA
DE CHILE

**ANEXO 2. COMPROMISO DE CONTRATACIÓN DE SEGURO MÉDICO**

**Convocatoria de Intercambio Incoming**

**Primer Semestre 2027**

**Compromiso de contratación de seguro médico**

**Ciudad de origen:** _____

**Fecha:** ____ / ____ / 2026

Yo, _____, titular del pasaporte N.º _____, estudiante regular de la carrera de _____, de la Universidad _____, país _____, me comprometo a contratar, desde mi país de origen, un seguro médico internacional que cumpla con los requisitos establecidos por la Universidad Autónoma de Chile y que se mantenga vigente durante toda mi estadía en Chile.

Declaro conocer que el seguro deberá contemplar una **cobertura mínima de USD 30.000 para servicios de salud**, incluyendo atención médica de urgencia, hospitalización, medicamentos prescritos, telemedicina, patologías preexistentes, COVID-19, salud mental, atención dental de urgencia y repatriación por motivos médicos o en caso de defunción. Asimismo, deberá contar con **modalidad de libre prestador**, conforme a las condiciones de la póliza.

En caso de ser aceptado/a en el programa, me comprometo a enviar una copia de la póliza de seguro médico al correo electrónico **eden.silva@uautonoma.cl**, a más tardar el **11 de enero de 2027**. La documentación deberá permitir verificar la vigencia, los montos de cobertura, las prestaciones incluidas y la modalidad de atención.

Declaro comprender que la presentación oportuna de una póliza que cumpla con los requisitos establecidos es obligatoria para participar en el programa y que, de no cumplir con este compromiso, podré quedar impedido/a de realizar mi intercambio en la Universidad Autónoma de Chile. **Asimismo, me comprometo a consultar con la compañía aseguradora el procedimiento para activar la cobertura y acceder a las prestaciones médicas durante mi estadía en Chile.**

**Nombre completo del/de la estudiante:** _____
**Firma del/de la estudiante:** _____