

Application For Admission
to University Semester Abroad

California State University, Fullerton

University Semester Abroad, CP-207
University Extended Education
2600 E. Nutwood Avenue
Fullerton, CA 92831-3145 U.S.A.
Telephone: (657) 278-2909
Fax: (657) 278-7114
email: usa@fullerton.edu
www.usa.fullerton.edu

Application For

- Fall 20____: August
 Spring 20____: January

Program Length One Semester Academic Year

Please complete this form thoroughly.

*Required for I-20 processing

*Name _____
(family name as it appears in passport) (given)

Mailing address:

Telephone Number _____
Fax Number _____
*E-Mail _____

*Date of birth _____
month day year *Country of birth _____

*Country of citizenship _____ Native language _____

* Male Female Single Married

Are you currently attending a college or university in your home country? Yes No

If yes, give name of school: _____

Are you studying in the U.S. currently? Yes No

If yes, give name of school _____

What is your major? _____

Have you taken the TOEFL or IELTS? Yes No Exam Date: _____ Score: _____

*Permanent address in your home country:

Name _____

Address _____ Home telephone # _____

_____ Work telephone # _____

Are you a permanent resident or U.S. citizen? Yes No

If married, will your spouse accompany you to the U.S.? Yes No

Name of spouse _____ Date of birth _____

Country of birth _____

How did you hear about University Semester Abroad?

Agency: _____ University: _____

Internet Friend/Family Fairs Other

Will children accompany you to the U.S.? Yes No

Name(s), date(s) and country (countries) of birth _____

All applicants who will enter the U.S. on a student visa must complete the following questions about financial support.

***Source of financial support:**

Scholarship Parent/Family member Friend Personal savings

Name of Sponsor _____

Mailing address of Sponsor _____

The financial sponsor should complete and sign the following statement.

I _____ certify that I will assume full financial responsibility
(name of sponsor)

(including educational expenses and living expenses) for _____ while he/she is enrolled in the
(name of applicant)

Semester Abroad Program at Cal State Fullerton. The applicant is my _____
(relationship to sponsor)

Signature of sponsor _____ Date _____

Please include an original letter from the sponsor's bank showing that there are sufficient funds to cover the student's expenses while in the U.S. Bank verification letters must have a current date and show funds available.

Do you want information on housing? Yes No

If yes, which one: On-Campus Dormitory Private Dormitory (University Village) Homestay Private Apartment

I certify that the above information is true and correct.

Signature _____ Date _____

Is an agent helping you? Yes No

Agent _____ Agent's email _____

To complete your application, please attach the following:

1. Original bank document or scholarship verification of support funds.
2. Photocopy of passport information page.
3. Original University transcript with in-progress courses.
4. Non-refundable \$100 check or international money order payable to Cal State Fullerton
5. Copy of TOEFL/IELTS official test results.

Method of Payment

A. Cashier's Check or Money Order payable to "Cal State Fullerton"

B. Visa No. _____ Master Card No. _____

Billing Zip Code _____ Exp. Date ____/____/____ Billing Zip Code _____ Exp. Date ____/____/____

Cardholder Name Signature (required for Credit Card Payments) Date _____