

Application Form for University Semester Abroad – Graduate

Program Section

Application For: Fall Spring

Term: _____

Program Length: One Semester Academic Year

How did you hear about University Semester Abroad?

- Agency
- Counselor/University
- Friend/Family
- I applied to CSU Fullerton in the past
- Search Engine
- Social Network (Facebook, QQ, other)
- Student Fair
- Other

Student Information

First Name/Given Name: _____

Last Name/Family Name: _____

Email Address: _____

Country and City of Birth: _____

Country of Citizenship: _____

Native Language: _____

Date of Birth (MM/DD/YY): _____

Gender: Male Female

Marital Status: Single Married

Will your children accompany you to the U.S.?

Yes Not coming with me to the U.S. I don't have children

Address in your Home Country

Street Name and Number: _____

City: _____

Zip Code: _____

Country: _____

Phone Number: _____

Education History

What is your major? _____

If you have taken TOEFL or IELTS or DAAD, please enter the score: _____

Are you currently attending a graduate program at a university in your home country?

Yes No

What is your graduate program? _____

What is your university? _____

What graduate program would you want to take classes for at CSUF?

	First Preference:	Second Preference:
Business	<input type="checkbox"/>	<input type="checkbox"/>
Civil & Environmental Engineering	<input type="checkbox"/>	<input type="checkbox"/>
Clinical Psychology	<input type="checkbox"/>	<input type="checkbox"/>
Computer Engineering	<input type="checkbox"/>	<input type="checkbox"/>
Computer Science	<input type="checkbox"/>	<input type="checkbox"/>
English	<input type="checkbox"/>	<input type="checkbox"/>
Environmental Studies	<input type="checkbox"/>	<input type="checkbox"/>
Geography	<input type="checkbox"/>	<input type="checkbox"/>
Gerontology	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical Engineering	<input type="checkbox"/>	<input type="checkbox"/>
Psychology	<input type="checkbox"/>	<input type="checkbox"/>
Screenwriting	<input type="checkbox"/>	<input type="checkbox"/>
Spanish	<input type="checkbox"/>	<input type="checkbox"/>
Special Education	<input type="checkbox"/>	<input type="checkbox"/>
TESOL	<input type="checkbox"/>	<input type="checkbox"/>
Visual Arts	<input type="checkbox"/>	<input type="checkbox"/>

Are you currently in the United States? Yes No

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

Are you transferring from another U.S. school? Yes No

Mailing Address (where your I-20 and correspondence can be sent)

How do you prefer to receive I-20? By Mail To pick up

Information Release

Information about your application can be released to the following person:

First Name/Given Name: _____

Last Name/Family Name: _____

Relationship: _____

Is a study abroad, travel or educational agency helping you? Yes No

Financial Support

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
- Sponsor
- Personal Savings

Parent/Family Member or Sponsor Name: _____

Declaration Section

Refund Policy

I have read and agree to the University Semester Abroad refund policy as stated on the website:
<https://international.fullerton.edu/usa/dates-costs#refundpolicy>

Yes No

Applicant's Signature

I hereby permit College Contact to submit the information which I have provided on this form to University Semester Abroad, California State University Fullerton via an electronic online application form created and maintained by California State University Fullerton.

Yes No

I certify that the above information is true and correct.

Signature

Date