

**ALI Student Application**

\*Required Field

First Name\* \_\_\_\_\_

Last Name\* \_\_\_\_\_

Program Semester at SDSU

Term Fall 2025

**Student Information**Please type your name exactly as it is in your passport.

Family Name\* \_\_\_\_\_

First Name\* \_\_\_\_\_

Middle Name(s) \_\_\_\_\_

Email Address\* \_\_\_\_\_

Date of Birth\* (MM/DD/YYYY) \_\_\_\_\_

Sex\* ☐ Male ☐ Female ☐ Unknown

City of Birth \_\_\_\_\_

Country of Birth\* \_\_\_\_\_

Country of Citizenship\* \_\_\_\_\_

**Permanent Address**

Permanent Address\* \_\_\_\_\_

Permanent City\* \_\_\_\_\_

Permanent State\* \_\_\_\_\_

Permanent Country\* \_\_\_\_\_

Permanent Postal Code \_\_\_\_\_

Permanent Phone Number\* \_\_\_\_\_

### Referral Source

Are you applying with the help of an agency?\* ☒ Yes

Agency Name\* College Contact GmbH

Contact Person\* Alexandra Michel

Agent Email\* amichel@college-contact.com

Are you currently attending a college/university? ☐ Yes ☐ No

Current College/University Name \_\_\_\_\_

### Program Information

Are you interested in a certificate?\* ☐ Yes ☐ No

Please select one of the Certificate Program below

Select	Program
<input type="checkbox"/>	Semester at SDSU - Business Certificate
<input type="checkbox"/>	Semester at SDSU - Business Engineering Certificate
<input type="checkbox"/>	Semester at SDSU - Certificate in International Media
<input type="checkbox"/>	Semester at SDSU - Environmental Studies Certificate
<input type="checkbox"/>	Semester at SDSU - Entertainment Management Certificate
<input type="checkbox"/>	Semester at SDSU - Homeland Security Certificate
<input type="checkbox"/>	Semester at SDSU - Hospitality, Tourism, and Recreation Management (HTM) Certificate
<input type="checkbox"/>	Semester at SDSU - Sustainable Tourism Management Certificate

Do you plan to study for one academic year (excluding summer session)?

☐ Yes ☐ No

### Visa Information

Will you require a SEVIS Form I-20 to apply for an F-1 student visa?\*

- ☐ Yes, I want to apply for an I-20  
☐ No, I do not want to apply for an I-20

*If you chose "Yes, I want to apply for an I-20," please complete the following section:*

### Source of Funds\*

☐ Self ☐ Family ☐ Other: \_\_\_\_\_

### Transfer Information

Are you transferring from another school in the USA? ☐ Yes ☐ No

### Application Fee Payment (\$175)

Method of Payment: ☒ Credit/Bank Card

### Credit/Bank Card

Cardholder's Name: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_

CVV2: \_\_\_\_\_

Credit Card Type:

- ☐ Visa
- ☐ Mastercard
- ☐ American Express
- ☐ DISCOVER

Expiration Date (MM/YYYY): \_\_\_\_\_

Cardholder's email address: \_\_\_\_\_

Cardholder's Signature: \_\_\_\_\_

### Confirmation

I certify that I have read all the information regarding enrollment and I-20 processing and the information I am providing in the application is true to the best of my knowledge.\*

☐ Yes

Do you need special services to accommodate a physical, visual or learning disability?

☐ Yes ☐ No

I agree to give Global Campus permission to release Directory Information (student name, major field of study, dates of attendance, degrees, honors and awards received) to interested parties.

☐ Yes ☐ No

☐ I certify that all the information I am providing in the application is true to the best of my knowledge. I verify all is true and correct.

☐ I hereby permit College Contact to submit the information which I have provided on this form to the ALI at SDSU via an electronic online application form created and maintained by the ALI.

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Student Signature

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Date