



Application Form
Summer English and Cultural Experience (July 9 – 27, 2012)

PART 1 – PERSONAL INFORMATION (Please print CLEARLY.)		
STUDENT NAME: <i>Family Name (Attach copy of passport name page)</i> <i>First Name (as it appears on your passport)</i>		GENDER: <input type="checkbox"/> Male <input type="checkbox"/> Female
COUNTRY OF BIRTH	DATE OF BIRTH: <i>Month Day Year</i> (e.g. JAN / 01 / 1979) / /	
COUNTRY OF CITIZENSHIP	NOTE: Applicant must be at least 18 years old. If younger than 18 years old, a local guardian of at least 25 years old is required.	
NATIVE LANGUAGE	STUDENT'S E-MAIL	
Permanent address in home country (required):		
ADDRESS: <i>Street</i>		<i>Apartment Number</i>
<i>City</i>	<i>Postal Code</i>	<i>Country</i>
TELEPHONE: <i>Country Code City Code Number</i>	FAX: <i>Country Code City Code Number</i>	
Have you attended any of our programs before? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, when?
Student's Representative:		
Relationship to student: <input type="checkbox"/> Agency <input type="checkbox"/> Relative		
AGENCY'S / RELATIVE'S NAME		
ADDRESS: <i>Street</i>		<i>Apartment Number</i>
<i>City</i>	<i>Postal Code</i>	<i>Country</i>
TELEPHONE: <i>Country Code City Code Number</i>	FAX: <i>Country Code City Code Number</i>	
AGENCY'S / RELATIVE'S E-MAIL		
PART 2 – PAYMENT PROCEDURE		
Full tuition and non-refundable application fee must be submitted at the time of application.		
Summer English and Culture Experience tuition (July 9 – 27, 2012)	\$ 1,125.00	
Application fee (non-refundable)	\$ 100.00	
OPTIONAL: <input type="checkbox"/> On-campus housing and meal plan fee (July 9 – 27, 2012)	\$ 1,200.00	
Please indicate the total amount you are enclosing with this application		\$
Payment Options (Please do not mail cash):		
<input type="checkbox"/> I have enclosed a money order/bank draft/traveler's checks in the amount of \$ (Please be sure to endorse your traveler's checks and make checks payable to CSUN.)		
<input type="checkbox"/> I would like to pay by credit card (We cannot accept American Express and Discover cards.) <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard Total to be charged \$		
CREDIT CARD NUMBER	3-DIGIT SECURITY CODE	EXPIRATION DATE (<i>month/year</i>)
NAME ON CREDIT CARD	CARD HOLDER'S SIGNATURE	
By signing above, I authorize California State University, Northridge to charge my credit card for the amount I have entered above.		

Please complete both pages.

Application Form • Summer English and Cultural Experience (July 9 – 27, 2012)

Please complete both pages.

PART 3 – VISA INFORMATION		
Are you currently in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, please use your I-94 form (a white or green card in your passport) to answer the following questions:		
DATE OF ENTRY	I-94 EXPIRATION DATE	VISA STATUS
PART 4 – CONFIRMATION OF ACCEPTANCE		
Please send my confirmation of acceptance to:		
<input type="checkbox"/> Use address shown on Part 1, Personal Information		
<input type="checkbox"/> Use other address:		
ADDRESS: <i>Street</i>	<i>Apartment Number</i>	
<i>City</i>	<i>Postal Code</i>	<i>Country</i>
<input type="checkbox"/> I authorize (<i>Name:</i> _____), (<i>Relationship to Student:</i> _____)		
to pick up my confirmation packet at the Admissions and Client Services office. Please contact him/her at		
(<i>Telephone Number or Email:</i> _____) when it is ready.		
PART 5 – SIGNATURE		
By signing below, I verify that the information contained in this application is accurate to the best of my knowledge. I acknowledge that I am required to pay the non-refundable application fee even if I decide to withdraw or cancel my enrollment.		
NAME OF STUDENT	SIGNATURE OF STUDENT	DATE (<i>month/day/year</i>)
NAME OF REPRESENTATIVE	SIGNATURE OF REPRESENTATIVE	DATE (<i>month/day/year</i>)

Insurance information

- Basic accident and health insurance for international students is required. You must have a plan that includes medical benefits of at least \$50,000 USD per accident or illness, medical evacuation coverage of at least \$10,000 USD, and repatriation coverage of at least \$7,500 USD.

Cancellation policy

- No refund is possible after the start of the program.
- All refund requests must be submitted in writing.
- A full course fee refund, less the \$100 application fee, is applicable if written request is received by our office 48 hours before the program start date.

Note: This program does NOT issue an I-20.

<input checked="" type="checkbox"/>	<p>Please mail/Fax/email completed application form to:</p> <p>Office of Admissions and Client Services The Tseng College California State University, Northridge 18111 Nordhoff Street Northridge, CA 91330-8343, U.S.A.</p> <p>(818) 677-6402 Fax: (818) 677-2288 iep@csun.edu http://TsengCollege.CSUN.edu/ieup</p>
-------------------------------------	--

