YOU MUST COMPLETE BOTH SIDES OF THIS APPLICATION

LONG BEACH CITY COLLEGE "LEADERS ACROSS CAMPUS"

NAME______DATE SUBMITTED____

"INTERNATIONAL FRIENDS" APPLICATION SEMESTER____

PHONE NUMBERS: HOME		CELL	OTHER
E-MAIL ADDRESS			
SEMESTERS AT LBCC	(Pleas	e print clearly)	
ETHNICITY	NGUAGE? (Not	required): Yes	GENDER: MALE FEMALE No (circle one)
Please circle: Speak Read	Understand	Foreign Language	
IN WHAT CAMPUS ORGANIZA	ΓΙΟΝS/TEAMS A	ARE YOU INVOLVED?	
LEADERSHIP POSITIONS HELD	:		
PLEASE LIST HOBBIES, INTERE	ESTS, AND SPOR	RTS;	
I WOULD LIKE TO KNOW MOR	E ABOUT STUD	ENTS FROM (List Cult	ural Interest):
I WOULD LIKE TO KEEP MY IN	TERNATIONAL	STUDENT(S) FROM L	AST SEMESTER:
I WOULD LIKE TO BE A FRIENI			
SPECIAL NEEDS/PREFERENCES	s: (Gender, langua	ges spoken, major, LAC	or PCC campus, etc.)
SOMEONE FROM YOUR COUN	NTRY? (circle on	e) Yes No Does	LIKE TO BE MATCHED WITH n't matter
I LEASE COMI LETE RE			
International Student(s)	Date Assigned	FICE USE ONLY**** N	Votes/Comments
\ /	<u> </u>		
Date Received			

NAME	
STUDENT ID #	AGEG.P.A. (CUMULATIVE)
ADDRESS	
CITY	ZIP CODE
"WHY I V	ASE WRITE A BRIEF PARAGRAPH ON ANT TO BE AN INTERNATIONAL FRIEND; E I CAN OFFER AN INTERNATIONAL STUDENT"
I understand that informatio Student I.D. number, and ad	on my application may be shared with my International Student. lress will not be shared.
Signature	Date

THANK YOU!

Return to Judy Oh, International Student Counselor, A-155. For more information, call (562) 938-4359.