

International Student Emergency Contact Form Must be completed and returned with application

Name of Applicant: First	Middle	Last
Home country	Date of Birth:	
International students who are successful a contact or sponsor in one of the surroundin Racine and Kenosha, many of the commun commute to and from campus. Campus ho	g communities. While there ities surrounding Gateway's	is public transportation in the cities of
Some things for you to think about as you p	olan your arrival and stay ar	e:
When you arrive, how will you get to the Where will you stay while you are enroll What is your plan for finding long-term How will you get to and from Gateway? Who could assist you if you became ill?	ed in school?	ou?
Please provide us with who we can contact need to have a contact person in your home	C ,	you are a student here. In addition, we
Contact in the U.S. Name		
Relationship to you		
Address		
City, State, Zip code		
Phone Number		
E-mail address		
Contact in your home country Name		
Relationship to you		
Address		
Phone Number		
Phone Number		
E-mail address		