



California State University San Marcos International Student Application for Admission

International Admissions • California State University San Marcos • San Marcos CA • 92096-0001

This form should be used by International applicants who plan to study at Cal State San Marcos on a student visa (F-1 or J-1)

A complete set of application material consists of this form, a form entitled "Affidavit of Financial Support," and an instruction sheet. If you do not have a complete set, you may request the additional material from the International Admissions Office by e-mail at intappl@csusm.edu, or download it from our website at <http://www.csusm.edu/global>.

1. Semester you are applying for: Fall Spring Year _____

2. Have you previously applied to Cal State San Marcos? No Yes If yes, when? _____

3. If you have a U.S. Social Security number, enter it here _____

4. Legal Name (On Passport) _____
Family (Last) Given (First) Middle

5. Other names(s) that may appear on your records _____
Family Given Middle

6. Mailing Address _____
Number and Street
City, Postal Code Country

7. Permanent Address Outside United States (Required) _____
Number and Street
City, Postal Code Country

8. Telephone _____ Country/Area Code/Number
9. Fax _____ Country/Area Code/Number

10. E-mail Address _____

11. Birthdate _____ 12. City and Country of Birth _____
Month/Date/Year

13. Country of Citizenship _____ 14. Country of Legal Residence _____

15. Ethnic Identity. Enter ethnic code from list below (Optional) _____

- | | | |
|---|---------------------------|----------------------------|
| 1 - American Indian or Alaska Native | J - Japanese | G - Guamanian |
| 2 - Black, non-Hispanic, including African-American | K - Korean | H - Hawaiian |
| 3 - Mexican American, Mexican, Chicano | R - Asian Indian | N - Samoan |
| A - Central American | 5 - Other Asian | 6 - Other Pacific Islander |
| B - South American | M - Cambodian | 7 - White |
| Q - Cuban | L - Laotian | F - Filipino |
| P - Puerto Rican | V - Vietnamese | 8 - Other |
| 4 - Other Latino, Spanish-origin, Hispanic | T - Thai | 9 - No Response |
| C - Chinese | S - Other Southeast Asian | D - Decline to State |

16. Sex Male Female

17. **Disabled Applicants (optional).** If you need special services to accommodate a physical, perceptual, or learning disability or would like information about these services, please check this box .

18. Under what immigration status (visa) do you intend to study at Cal State San Marcos?

Student Visa (F-1) Exchange Visitor (J-1) Other (specify) _____

19. If you are in the U.S., what is your current immigration status?

F-1 J-1 B-1 or 2 H-1 or 4 Other (specify) _____ I am not in the U.S.

20. What is your degree objective?

Bachelor's Degree (BA or BS) Second Bachelor's Degree Master's Degree Teaching Credential

21. Name of Intended Major or Graduate Degree Program _____

22. Emphasis or Concentration (if any) _____ Alternate Major (optional) _____

23. Class level at time of entry to Cal State San Marcos

- First-time freshman (no transferable College level credit)
- Lower-division transfer student (59 or fewer transferable credits)
- Upper-division transfer student (60 or more transferable credits)
- Graduate/postbaccalaureate student (Have a four-year bachelor's degree)
- Other (specify) _____

24. Enter test scores and dates you took, or plan to take, each test.

| Test | Score (s) | | | | | Date |
|-------|------------|----------|---------------|-------------------|------------|------|
| | Listening= | Reading= | Writing= | Speaking= | Total= | |
| TOEFL | Listening= | Reading= | Writing= | Speaking= | Total= | |
| IELTS | Listening= | Reading= | Writing= | Speaking= | Total= | |
| SAT I | Verbal= | | Math= | | Total= | |
| ACT | Eng= | Math= | Reading= | Science= | Composite= | |
| GRE | Verbal= | | Quantitative= | | Analytic= | |
| GMAT | Verbal= | | Math= | Analytic Writing= | | |

25. Secondary/High School Information

Name of secondary school from which you graduated _____

Location _____ City and Country _____ Dates of Attendance: _____ From _____ To _____

Name of Diploma/Certificate _____

Language of Instruction _____

26. **Post-secondary educational history.** Provide information on all post-secondary institutions attended, colleges, universities, and language school, even if you received no credit. Begin with most recent institution attended. Send transcripts from all schools listed.

| Name of School | School Type* | Location (City and Country) | Dates of Attendance | | Degree Earned | Language of Instruction |
|----------------|--------------|-----------------------------|---------------------|----|---------------|-------------------------|
| | | | From | To | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

*JC=Junior or two-year College; C=3 or 4-year college or university; G=Post-Graduate School; LS=Language School

27. List below all high school and college courses you are currently enrolled in or plan to enroll in (including summer sessions and language programs) before attending Cal State San Marcos.

| Courses In Progress | | | |
|---------------------|-----------|------------------|------------|
| School | Term/Year | Course No./Title | Unit Value |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Courses Planned | | | |
|-----------------|-----------|------------------|------------|
| School | Term/Year | Course No./Title | Unit Value |
| | | | |
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28. **Conditional Admission** If you do not meet the English proficiency requirement, but are otherwise eligible for admission, we can offer conditional admission if you enroll full-time in the University's intensive English course, the American Language and Culture Institute (ALCI) prior to beginning your academic studies at Cal State San Marcos. Please place an X on the appropriate line:
 ___ I will accept / ___ I will not accept full-time enrollment in ALCI.

29. **Dependent Information.** If you are married and your spouse and/or any children will accompany you to the U.S. while you are studying at Cal State San Marcos, please provide information about each person below. Please note that you will be required to show additional financial support of \$6,000 for a spouse and \$4,000 for each child on your Affidavit of Financial Support.

| Family Name | Given Name | Relationship | Country of Birth | Date of Birth |
|-------------|------------|--------------|------------------|---------------|
| 1. _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ |

30. How did you first learn of Cal State San Marcos?

- | | |
|---|---|
| <input type="checkbox"/> School counselor or teacher | <input type="checkbox"/> Magazine or printed guide |
| <input type="checkbox"/> U.S. Educational Advising Center in your country | <input type="checkbox"/> Cal State San Marcos website |
| <input type="checkbox"/> University fair in your country | <input type="checkbox"/> CSU Mentor website |
| <input type="checkbox"/> Educational agent | <input type="checkbox"/> Current or former San Marcos student |

Name of Agency: _____

- | | |
|--|--|
| <input type="checkbox"/> Education abroad website | <input type="checkbox"/> Friend or family member |
| <input type="checkbox"/> Community College Advisor | <input type="checkbox"/> Other (specify) _____ |

31. Certification – To be read and signed by all applicants.

I certify under penalty of perjury that I have provided complete and accurate responses to the items on this application. I further certify that all official documents submitted in support of this application are authentic and unaltered records that pertain to me. I authorize release of any information submitted by me in connection with this application to any person, firm, corporation, association, or government agency, but only to verify or explain the information, obtain pertinent records, or in connection with perjury proceedings. I understand that any misrepresentation may be cause for denial or cancellation of admission or enrollment. I understand that my signature is certification of the accuracy and completeness of the information I have provided.

I agree to meet the California State University comprehensive health insurance requirements for the duration of my studies.

Signed at: _____
City/Country Applicant's Signature Date

This application form, supporting documents, transcripts, and test scores should be mailed to:

**International Admissions
Office of Admissions
California State University San Marcos
333 South Twin Oaks Valley Road
San Marcos, California 92096-0001
USA**