

This application form is for international students entering the U.S. on an F or J or any other non-immigration visa. Permanent residents and U.S. citizens should use the CSU application for domestic applicants. Attach a \$55 (USD) application fee, payable to California State University, San Bernardino. The fee is nonrefundable and may not be transferred to another term. Please print responses in BLACK/BLUE ink or type ONLY. Response to each item is mandatory unless otherwise indicated.

Applicant Information

This is an application for admission to: Fall Winter Spring Year:

Student ID Number: Leave this blank if you do not have an SID#. CSUSB will assign you an ID number.

If you have previously applied to or attended CSUSB, please list:

Date of Application: Last quarter attended: Fall Winter Spring
Year:

Legal Name (on passport)

Last/Family Name: First/Given Name: Middle Name:

Other name(s) that may appear on your academic records:

Last/Family Name: First/Given Name: Middle Name:

Last/Family Name: First/Given Name: Middle Name:

Current mailing address in the United States (if applicable):

Street Number/Name:

City: State: Zip Code: Country:

Home country permanent address (required):

Street Number/Name:

City: State: Zip Code: Country:

Home country telephone (incl. area code or country and city code):

Phone number in the United States (if applicable):

E-mail Address: Birth date:

Gender: Male Female

Intended Major

Intended major:

Emphasis/Concentration (if any):

Alternative major (required):

Office Use Only

College Credit

How many total transferable semester units will you have completed at the time of entry/reentry to CSUSB? (If you are unsure, leave blank and attach copies of your transcripts. Include units in progress and units planned. Semester units = quarter units x 2/3)

What is your degree objective?

Citizenship Information

Country of Citizenship: Country of Birth:

Country of Legal Residence: City of Birth:

If you hold an I-20, list current issuing school's name:

School Fax #: School Telephone #:

Your INS Admission (I-94) Number:

Date I-20 issued (MM/YYYY): Date I-20 expires:

(attach copies of I-20 or DS-2019, passport page(s), visa stamp page - front and back)

Month and Year you arrived or will arrive in California (MM/YYYY format):

Citizenship status:

If you were born outside of the United States, what year did you move to the U.S.? (YYYY format):

Ethnic Identity:

Academic Information

Secondary/High school attended:

City and Country:

Graduation Date: (MM/YYYY):

Test Scores and Dates:

TOEFL Score(s): Date:

IELTS Score(s): Date:

Are you interested in participating in NCAA-sanctioned intercollegiate athletics competitions?

If yes, contact the CSUSB Department of Athletics at (909) 537-5011 or visit <http://athletics.csusb.edu>.

Previous Institutions

List in chronological order all colleges and universities attended, including professional schools, regardless of length of attendance, even if no work was completed. For units in progress and planned, please see next item.

Institutions Attended	Enrolled				Major	Degree Earned Mo/Yr. (to be) Received
	Mo.	Yr.	Mo.	Yr.		

Courses Planned/Course History

List below the college courses in which you are currently enrolled and additional courses you plan to compete (including summer school) before entering CSUSB. Attach a separate sheet if more space is needed.

Courses in Progress			
Institution	Term/Year	Dept. Course # & Title	Units
Total Units in Progress			

Courses Planned			
Institution	Term/Year	Dept. Course # & Title	Units
Total Units Planned			

Upper Division Transfer

For upper division transfer students with 60 or more transferable semester (90 quarter) units, please list courses completed or in progress that meet CSU General Education requirements in Oral Communication, Written Communication, Critical Thinking and Mathematics/Quantitative Reasoning. California Community Colleges usually designate CSU GE requirements as:

A1 Oral Communication, **A2** Written Communication, **A3** Critical thinking and **B4** Mathematics/Quantitative Reasoning.

Requirement	Institution	Term/Year	Dept. Course # & Title	Units	Grade or In Progress
A1. Oral Comm.					
A2. Written Comm.					
A3. Critical Thinking					
B4. Mathematics					

Other Information

How did you first hear about CSUSB?

Please list people to contact in case of an emergency (in the order you would want them contacted)

Name	Relationship	Phone #

Additional Notes

Use of Social Security Number. CSU San Bernardino uses the social security number as an identifier for student records maintained in your association with the campus and, if needed, to help debts owed to the university. The CSU collects the social security number pursuant to Section 41201, Title 5, California Code of Regulations and Section 6109 of the Internal Revenue Code. If you have a social security number, you are required to include it on this admission application. If you do not have a social security number at the time you file this application, leave the item blank, and the campus will assign a substitute number.

Nondiscrimination policy. The California State University does not discriminate on the basis of race, color, national origin, gender, physical handicap or sexual orientation in the educational programs or activities it conducts. Questions regarding discrimination should be addressed either to the Assistant Vice Chancellor, Academic Affairs, Access and Retention, The California State University, 401 Golden Shore, Long Beach, CA 90802-4201, or to the Regional Director of the Office of Civil Rights, Region IX, 50 United Nations Plaza, San Francisco, CA 94102.

Certification - To be read and signed by all applicants to certify the accuracy of information provided.

I certify (swear) under penalty of perjury, or after first being duly sworn, that I have provided complete and accurate responses to the items on this application. I further certify (swear) 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 my application to any person, firm, occupation, association or government agency, but only to verify or explain the information, obtain pertinent records, or in connection with perjury proceedings. My signature certifies the accuracy and completeness of the information provided. **I also understand that any misrepresentations may be cause for denial or cancellation of admission or enrollment.** I also certify that all information given on this application is correct and complete, and I understand that any omission/misinformation may result in denial of my application or dismissal from CSUSB.

Signed at: _____

City

State

Country

Applicant's Signature

Date

The information provided below should support the information provided in part A. This part will be forwarded to the department responsible for the degree sought.

Applicant Information

Specify intended major/program objective:

This is an application for admission to: Fall Winter Spring Year:

Student ID Number: Leave this blank if you do not have an SID#. CSUSB will assign you an ID number.

Legal Name (on passport)

Last/Family Name: First/Given Name: Middle Name:

Current mailing address:

Street Number/Name:

City: State: Zip Code: Country:

Home telephone (incl. area code or country and city code):

Phone number in the United States (if applicable):

Daytime phone number (in the U.S.A.):

E-mail Address: Birthdate:

Gender: Male Female Ethnicity:

Previous Institutions

List in chronological order all colleges and universities attended, including professional schools, regardless of length of attendance, even if no work was completed. If college is affiliated with a university, please specify.

Institutions Attended	Enrolled				Major	Degree Earned Mo/Yr. (to be) Received
	Mo.	Yr.	Mo.	Yr.		

Courses Planned/Course History

List below the college courses in which you are currently enrolled and additional courses you plan to compete (including summer school) before entering CSUSB. Attach a separate sheet if more space is needed.

Courses in Progress			
Institution	Term/Year	Dept. Course # & Title	Units

Courses Planned			
Institution	Term/Year	Dept. Course # & Title	Units

Test Scores

GRE, General: TOEFL: IELTS: GMAT:

Other Information

List your first language here:

Indicate proficiency in other languages in which you have competence:

Language: Reading: Writing: Speaking:
 Language: Reading: Writing: Speaking:
 Language: Reading: Writing: Speaking:

Statement of Purpose

Please write a brief statement of purpose describing your reason(s) for pursuing graduate study. Include any additional information concerning your preparation which is pertinent to the objective specified. You may also attach a resumé and/or letters of reference if required by department.

I certify that the information submitted in this application is true. I understand that any misrepresentation will be cause for denial of admission.

Signature: _____

Date: _____

Documentation Required

As part of the application for Admissions, The U.S. Citizenship and Immigration Services requires that all F-1 (Certificate of Eligibility for Nonimmigrant - Form I-20) and J-1 (Certificate of eligibility for Exchange Visitor Form DS-2019) applicants provide evidence of adequate funds to meet the financial obligations of enrollment at a U.S. college/university.

If the student will use their own personal funds as the source of financial support, the student must provide their official bank statement showing the availability of at least \$28,816 USD (undergraduate) or \$27,226 (graduate) in liquid assets. Bank statements must not be more than 6 months old.

If the student will be supported by a private sponsor (such as a family member, friend or private institution), the sponsor must sign the Statement of Financial Obligation below or provide a letter declaring their relationship to the student and their intent to provide financial support throughout the student's duration of study at CSUSB. In addition, sponsors must also provide an official bank statement showing the availability of at least \$28,816 USD (undergraduate) or \$27,226 (graduate) in liquid assets. Bank statements must not be more than 6 months old.

If the student will be sponsored by a public agency (such as an embassy, home government, public institution or religious organization), the agency must provide official certification that the appropriate costs will be covered. Sponsorship statements must be no more than 12 months (1 year) old.

Last Name:

First Name:

Middle Initial:

Permanent Foreign Address:

Estimated Student Budget for One (1) Academic Year - 3 Quarters

Expenses	Undergraduate (36 Units)	Graduate (24 Units)
Tuition (\$248/unit)	\$8,928	\$5,952
State University Fees	7,047	8,433
Books	1,200	1,200
On-Campus Housing	6,300	6,300
Health Insurance*	841	841
Personal Expenses	4,500	4,500
Total	\$28,816	\$27,226

*NOTE: All fees are subject to change without notice. Students 24 and under.

**Graduate Business Professional Fee: \$185/unit for ALL courses.

Dependent Information

If your spouse or children will accompany you to the United States, you must provide proof of additional funding of \$1,800 for a spouse and \$1,200 per child per 3-quarters in order for their names to be listed on your I-20. Please list below your dependents accompanying you to the United States:

Last Name	First Name	Relation	Country of Birth	Country of Citizenship	Date of Birth (MM/DD/YYYY)

Personal Financial Support

You must finish verification for financial support for the entire academic year. Complete any of the three sections below that are applicable. Give all amounts in U.S. Dollars (USD). If there is more than one sponsor or bank in any category, you must attach all other letters, signatures and certificates (originals only).

Personal Support: My personal financial resources at this time are \$ USD.

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:

Private Support/Sponsor

I guarantee, without reservation, to support the educational costs and living expenses, including tuition fees, books and supplies, room and board, health insurance, medical or emergency expenses, travel and other miscellaneous expenses for (print name of student): while he/she is enrolled at California State University, San Bernardino. I also agree to furnish additional support for this student's dependents as listed previously on this form or any other that may later come to the United States. I further guarantee that the student will not become a public charge during his/her stay in the United States.

Sponsor's Signature: _____ Date:

Sponsor's Name (print):

Relationship to Applicant:

Address:

Certified by Bank Official:

I certify that the current balance in the applicant's account at this bank is: \$ on (date)

Signature:

Name/Title:

Bank Name:

Address:

Official Bank Seal or Stamp:

Government, Foundation Agency or Corporate Fellow Support

Please submit this form to the agency providing your financial support for certification of the required information or instruct the agency to send a letter to the International Student Admissions Office as well as the Student Accounts Office at California State University, San Bernardino specifying the amount of the award, period of support, and any condition or terms that pertain.

Agency Name:

Address:

I certify that the agency named above will provide the applicant the equivalent of \$ USD per year for the duration of his/her studies.

Signature of Agency Official: _____ Date:

Print Name: Title:

Address:

Certification By Applicant

The above information is complete and correct to the best of my knowledge.

Signature: _____ Date: _____