



CALIFORNIA STATE UNIVERSITY FULLERTON

University Extended Education

International Student Leadership Program

International Programs, Asia,

University Extended Education

2600 E. Nutwood Ave. Ste. 950, Fullerton, CA 92831, U.S.A.

Telephone: (657) 278-5688 Fax: (657) 278-7055 e-mail: wkang-abreu@fullerton.edu

Application for Admission to Summer 2011 (Please circle one)

Session 1 (July 10 - July 30, 2011) Session 2 (July 17 – August 6, 2011)

Please complete this form thoroughly.

Name (as it appears in passport) _____
(Family/surname/last name) (Given/first name)

Mailing address:

Phone Number (____)-____-_____
Country City Phone number
Cell Number: (____)-_____
Country Cell number
Fax Number: (____)-____-_____
Country City Fax number
E-Mail _____

Date of birth ____/____/____
Month / day / year

Country of birth _____

Country of citizenship _____

Native language _____

Male___ Female___

The name of college or university you are currently attending:

Your academic standing is: First time freshman___ Sophomore___ Junior___ Senior___ Graduate ___

Your major: _____

*Permanent address in your home country:

Name _____ Relationship _____

Address _____ Home Phone # (____)-____-_____
Country City Phone number

_____ Work Phone # (____)-(____)-_____
Country City Phone number

_____ Cell Phone # (____)-(____)-_____
Country City Phone number

***Source of financial support (minimum \$6,000):**

Parent/Family member ___ Friend ___ Personal savings ___

Name of Sponsor _____

Mailing address of Sponsor _____

The financial sponsor should complete and sign the following statement.

I _____ certify that I will assume full financial
(Name of sponsor)
responsibility (including educational expenses and living expenses) for _____
(Name of applicant)

While he/she is enrolled in the Summer Short-term Study Abroad Program at Cal State Fullerton. The
applicant is my _____
(Relationship to sponsor)

Signature of sponsor _____ Date _____

Please include an original letter from the sponsor's bank showing that there are sufficient funds to cover the student's expenses while in the U.S. Bank verification letters must have a current date and show funds available.

To complete your application, please attach the following:

1. Original bank document or scholarship verification of support funds.
2. Photocopy of passport information page.
3. Completed DS2019 application form
4. Program fee of \$3,650 including \$200 of Non-refundable Deposit (extra processing fee will incur if paid by credit card or wire transfer) due May 15, 2011.

Method of Payment

- A. Cashier's Check or Money Order payable to "CSUF ASC"
- B. Wire transfer – transfer information available upon request.
- C. Credit Card: Visa ___ MasterCard ___ Discover ___ AMEX ___

Authorized amount to be charged on the credit card _____

Card Number _____ **Exp. Date** ____/____
(Month/Year)

Cardholder Name _____

Cardholder's Signature _____
(required for Credit Card Payment)

Date: _____
Month/day/year

*Note: No refund after the program starts.