

APPLICATION FOR ADMISSION
CALIFORNIA INTERNATIONAL UNIVERSITY
(Please type or print in ink)

PROGRAM INFORMATION

Term you plan to enroll:

Fall Winter Spring Summer Year _____

Degree Program you are applying to:

Bachelor of Science in Business Management Master of Science in International Business

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle _____

Date of Birth _____ Sex M F

Country of Birth _____ Citizenship _____

Address in the United States _____

Apt. Number _____ City _____ State _____ Zip Code _____

Telephone Number in U.S. _____

Address in Home Country _____

Telephone Number in Home country _____

E-mail Address _____

IMMIGRATION INFORMATION

Are you currently in the U.S.? ____ Yes ____ NO

If yes, please state date of admittance into the U.S. (mo/day/year) _____

What type of visa are you holding in the U.S.? _____

Visa Number _____ Issued date _____

Admission number (I-94) _____

Passport number _____ Expiration date _____

Driver's License number _____ State Issued _____

APPLICATION FORM

EDUCATION INFORMATION

Name of High School Graduated from _____

Date of Graduation _____ City and Country of High School (City) _____ /(Country) _____

List in chronological order the names and locations of all institutions attended after high school.

Name of Institution _____

Location _____ Dates _____ Degree earned _____

Name of Institution _____

Location _____ Dates _____ Degree earned _____

FINANCIAL INFORMATION

A BANK STATEMENT MUST BE SUBMITTED

Indicated the estimated funds available to you during each year you expect to enroll at CIU \$ _____

From what source will you receive these funds?

___ Sponsor (provide information below) ___ Personal Savings (provide bank statement)

If applicable, provide sponsor's name _____

Sponsor's Address _____

City _____ State _____ Zip Code _____

Sponsor's Telephone Number _____

EMERGENCY CONTACT IN THE UNITED STATES

In case of emergency, contact _____ Relationship to Student _____

Emergency Contact's address _____

City _____ State _____ Zip Code _____

Emergency Contact's Telephone Number _____ Day _____

APPLICANT CERTIFICATION

I certify that the information given in this application is complete and accurate to the best of my knowledge.

Upon signature of this application, I agree to comply with all the necessary regulations and school standards of conduct.

Applicant's Signature _____ Date _____

Sponsor's Signature _____ Date _____

DEPENDENTS OF APPLICANTS

Only for international students who need I-20 forms

1. Name _____

Sex M F

Relationship to Applicant _____

Date of Birth _____

Place of Birth _____

Country of Citizenship _____

2. Name _____

Sex M F

Relationship to Applicant _____

Date of Birth _____

Place of Birth _____

Country of Citizenship _____

3. Name _____

Sex M F

Relationship to Applicant _____

Date of Birth _____

Place of Birth _____

Country of Citizenship _____

CREDIT CARD INFORMATION

FOR THOSE WISHING TO PAY BY CREDIT CARD

Cardholder's Name _____

(print name as found on card)

Type of card (We accept Visa, MasterCard, and American Express) _____

Expiration Date _____ Card Number _____

Amount to be charged _____

Cardholder's Signature _____ Date _____

You may also pay by:

- 1) a check from an American bank (make check payable to California International University) or
- 2) an international money order (make money order payable to California International University)

DO NOT WRITE BELOW THIS LINE

Admission Approved _____ Conditional Acceptance _____ (See conditions below.) Admission not Approved _____

Units Status Full Time Part Time

TOEFL Yes In progress

Original Transcript Yes No

Evaluation Service Yes No

Scholarship Application Yes No

Fees Registration Evaluation Deposit

Conditions (for Conditional Acceptance) _____

Signature of Admissions Official _____ Date _____

