CSUF EXCHANGE STUDENT APPLICATION
CHECK LIST

APPLICATION DEADLINE
Please note that the following is the deadline to submit your application:

- Fall semester: May 1
- Spring semester: October 15

THE FOLLOWING DOCUMENTS MUST BE SUBMITTED TOGETHER WITH THE APPLICATION FORM

☐ Completed CSUF Exchange Student Application Form

☐ As needed, separate bank documents or bank statements dated within one year from application date. Bank documents must be on bank letterhead and include name of account holder and relationship of account holder to CSUF Exchange student applicant. 

[Note: Check here [       ] if bank certificate is indicated and signed on page 4 - a separate bank letter is not required.]

☐ A Statement of Purpose (maximum one page in length) detailing your academic goals and reasons for choosing to study at Cal State University, Fullerton.

☐ Copy of TOEFL score: 500 (PBT); 61 (iBT) or 6.5 (IELTS)

☐ English language translation of transcripts from home institution.

☐ Copy of valid passport

PRINT AND SUBMIT THE COMPLETED APPLICATION TO YOUR HOME INSTITUTION COORDINATOR WHO WILL SEND YOUR APPLICATION AND COPIES OF DOCUMENTS TO:

Ms. Christine Pircher-Barnes
Director, International Student Services
California State University Fullerton
2600 E. Nutwood Ave, College Park CP-207
Fullerton, CA 92831

For questions please email: cpircher@fullerton.edu

International Programs office use only

CSUF Staff Initial ______ Date __________

Exchange student: Length of stay: __________________________ Study agreement code: ☐ INTLIE2
Position in student’s country (please only check one) ☐ 215 University undergraduate student ☐ 214 University graduate student
Received: ☐ Completed application ______ ☐ separate bank documents ______ ☐ Statement of Purpose ______
☐ TOEFL score ______ ☐ Official transcript (English translation) ______ ☐ Passport copy ______

Source of financial support:

<table>
<thead>
<tr>
<th>Source of financial support</th>
<th>One semester</th>
<th>Two semesters</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition &amp; fees paid by program sponsor</td>
<td>$7,555</td>
<td>$15,110</td>
</tr>
<tr>
<td>Minimum required from student</td>
<td>$9,670</td>
<td>$19,321</td>
</tr>
<tr>
<td>Actual amount provided by student</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exchange student’s personal funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exchange student’s government (if any)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Exchange Student Application Form

Instructions: Please answer every question on this application. Do not abbreviate. Write “n/a” if a question is not applicable. Applications will not be accepted directly from student applicants. Applications must be submitted via your home institution exchange coordinator who will send it via email attachment to the CSUF International Programs office. PLEASE DO NOT MAIL PRINTED COPIES OF YOUR APPLICATION.

1. Which term are you applying for:  □ Fall only Year ____________  □ Spring only Year ____________  
   □ Fall and Spring Year ________

2. Have you attended CSUF before?  □ No  □ Yes (Please indicate semester/year attended: _______________________

3. Last/Family name: ___________________________________  First Name ____________________________  Middle Name ____________________________

4. Date of birth: __________/_________/__________  5. Gender: □ Male  □ Female

6. Mailing Address: __________________________________________________________________________

7. Phone: ____________________________  Email: PLEASE PRINT CLEARLY ____________________________

8. Last institution attended or where bachelor’s degree will be received: ____________________________


10. Country of permanent residence: ____________________________

11. Country of citizenship: ____________________________

12. Current level of study at home institution: □ Undergraduate Student  □ Graduate Student

NOTE: all exchange students (regardless of home institution level) will be admitted as junior undergraduate at CSUF

13. Field of study at home institution: ____________________________________________

14. Intended field of study at CSUF: ____________________________________________

15. Duration of Exchange:
   □ FALL SEMESTER ONLY: August 17 – January 1  
   □ SPRING SEMESTER ONLY: January 21 – May 27  
   □ FALL & SPRING: August 17 – May 27

16. Have you studied or worked outside your home country? If so, please indicate below: (do not include vacation travels)

   Location ____________________________  Purpose of stay ____________________________  Length of stay ____________________________

   Location ____________________________  Purpose of stay ____________________________  Length of stay ____________________________

17. Do you have any physical or psychological conditions that require professional, ongoing treatment?  □ Yes  □ No

   If yes, please explain: ____________________________________________

   __________________________________________________________________________

   Note: please attach a medical certification indicating your ability to study abroad.
18. Please describe any special needs or services you will require during your exchange (i.e. dietary considerations, medications, learning aids, or facilities with disabled access): ________________________________________________________________
________________________________________________________________________________________________________

Note: The CSUF International Programs office will make every reasonable effort to place qualified students that have special needs or required other services. The information requested above is important so that we can verify that CSUF is able to accommodate your needs. This information is considered confidential and will not be shared with anyone except those departments providing services. It will not influence the decision of your application for the exchange program.

19. Person in home country to contact in case of emergency:

Name: __________________________________________________________________________________________________
Address: __________________________________________________________________________________________________
Telephone: ________________________________  Alternate phone number: ____________________________
Email address: PLEASE PRINT CLEARLY __________________________________________
Relationship to you: ________________________________

HOUSING OPTIONS
You must submit housing request online: http://extension.fullerton.edu/international/housing/default.aspx
Housing requests include: on-campus dorm, University Village, homestay and apartments. Housing requests are on a first-come, first-served basis, especially applications for on-campus dorms. Space is limited.

HEALTH INSURANCE
All exchange visitors (both J-1 principals and J-2 dependents) are required to purchase and maintain the CSU International Student Health Insurance Plan. It may be purchase online at www.csuhealthlink.com with a Visa or MasterCard credit card. Health insurance premiums must be purchased for the duration of the exchange program. Please see “Estimated Expenses” table on page 4. Failure to purchase and maintain CSU International Student Health Insurance is a violation of the Exchange Visitor Program regulations. CSUF treats failure to carry CSU International Student Health Insurance as a serious violation of the exchange visitor program and J-1 visa regulations and may lead to termination and dismissal.

Exchange students cannot be waived from the health insurance requirement. An alternate health insurance policy from their home country will not be accepted. There are NO EXCEPTIONS.

Health insurance is also required when exchange students participate in academic training upon completion of their program. They may continue the same CSU International Student Health Insurance Plan. Insurance policies offered through their employers may be acceptable if these policies meet the U.S. Department of State requirements.

FULL-TIME ENROLLMENT
All exchange students are considered “full-time” when they are enrolled in 12 units of classes. If your institution requires you to enroll in 15 units of classes, you must submit a letter of verification from your home institution exchange program coordinator. This letter should be submitted ONLY AFTER you are admitted. You will receive an email from the International Programs office requiring you to submit an enrollment form indicating your choice of classes. When you submit this enrollment form, please include the verification letter from your home institution if you are required to register in 15 units of classes.

J-1 VISA APPLICATION PROCEDURES
Information on obtaining the J-1 exchange visitor visa will be emailed to you after you are admitted to our exchange program.
Declaration and certification of finances

While Cal State Fullerton tuition fees are waived for exchange students, participants must show proof that they have the available funds to support themselves for the entire length of the exchange program at Cal State Fullerton. Exchange students are not eligible for financial aid through CSUF and should not rely on working to support themselves during their studies. The cost of living can be expensive in California but your expenses will vary depending on your choice of accommodation and your personal spending habits. The amounts listed below are average expenses. You are required to demonstrate that you have sufficient funds to cover these amounts:

<table>
<thead>
<tr>
<th>ESTIMATED EXPENSES</th>
<th>One semester (5 months)</th>
<th>Two semesters (10 months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Living expenses (variable)</td>
<td>$8,306</td>
<td>$16,612</td>
</tr>
<tr>
<td>Health Insurance *</td>
<td>$504</td>
<td>$989</td>
</tr>
<tr>
<td>Book/Supplies/Tests (Variable)</td>
<td>$860</td>
<td>$1,720</td>
</tr>
<tr>
<td><strong>Total (estimated)</strong></td>
<td><strong>$9,670</strong></td>
<td><strong>$19,321</strong></td>
</tr>
</tbody>
</table>

* Health insurance premiums may change each year.

- All exchange students should register in a maximum of 12 units of classes. If your home institution requires you to enroll in 15 units, you must submit a letter from your home institution exchange student coordinator to verify the requirement. Exchange students are not allowed to enroll in more than 15 units of classes.

SOURCE OF FINANCIAL SUPPORT: Indicate the amount of financial support in U.S. dollars each category available for the duration of the exchange program.

<table>
<thead>
<tr>
<th>Minimum amount required</th>
<th>$9,670 (for one semester)</th>
<th>$19,321 (for one academic year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal / family funds:</td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
<tr>
<td>Home government funds:</td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
<tr>
<td>other funds:</td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
<tr>
<td>(please describe __________________ )</td>
<td>(please describe __________________ )</td>
<td></td>
</tr>
<tr>
<td><strong>Total funds available</strong></td>
<td>$ __________________</td>
<td>$ __________________</td>
</tr>
</tbody>
</table>

CERTIFICATION OF FINANCIAL SUPPORT:

“I guarantee that the sum of (U.S. dollar) $ __________________ will be available to the above-named student for his or her study at California State University, Fullerton.”

Name of sponsor: ____________________________________ Relationship to student: ____________________________________

Address of sponsor: __________________________________________________________________________________________

Sponsor’s signature: ____________________________ Date: ______________________________

Bank Certification (This section must be completed by a bank official)

Name of depositor: ____________________________ Relationship of depositor to student: ____________________________

Account type: [ ] Checking [ ] Savings [ ] Other __________________ Date opened: ____________________________ (month/date/year)

Current balance: $ __________________ in U.S. Dollars Today’s date ____________________________ (month/date/year)

Bank name: ____________________________

Bank address: ____________________________

Bank seal or stamp (required)

Name of Bank official: ____________________________

Signature of bank official: ____________________________
PERMISSION FOR RELEASE OF INFORMATION AND STATEMENT OF UNDERSTANDING

I authorize the Exchange Coordinator at my home institution to send my official academic records/transcripts to the Exchange Student Advisor at CSUF. I understand that official academic records/transcripts of the work that I undertake at the host institution will be sent to my home institution provided that: all fees not covered by the program, and any remaining debts which are my responsibility, are paid in full prior to departure from CSUF. I understand that my home institution or CSUF will withhold my certified transcripts until such fees are paid. I agree to immediately notify the advisor at my home institution and the Exchange Student Advisor at CSUF if I no longer want to be considered for an overseas placement or if I wish to end my enrollment prior to the official completion of the term at the host institution.

If I accept placement, I agree that:

- I will take part in all aspects of the program, including orientations, official program activities and evaluation. I understand that I am considered a representative of my home country and university, and that my active participation at the host institution is essential to the sustainability of the exchange program.
- I understand that I must submit a complete CSUF participant evaluation at the end of my exchange.
- I will pay to my home institution the designated tuition/fees covering the full period of my exchange placement.
- I will purchase CSU International Student Health Insurance coverage as required by CSUF and the United States.
- I understand that the exchange programs are competitive and that applicants will be chosen based on their academic abilities, suitability to the program and space availability at the host institution.
- My placement will be limited to the specified period. An extension request is subject to review and the approval of my home institution and CSUF Exchange Coordinators.
- My exchange placement may be terminated early by CSUF or my home institution if I fail to remain enrolled full-time, fail to maintain minimum academic standards (defined by CSUF as a minimum of 2.0 GPA), or am found by CSUF or my home institution to be in violation of laws or regulations of the host country or CSUF.
- If I withdraw from the program anytime after accepting the placement, or if my exchange placement is terminated after I take up placement at the host institution, I understand that I may still be obligated to pay (in part or in full) the program fees at the discretion of the host institution in collaboration and agreement with my home institution.
- I understand that if I am admitted to CSUF as an exchange student, my status is that of a non-degree student. Should I wish to change my status to a degree program in the future, I will need to satisfy the requirements that CSUF has established for admission to degree programs for all international students.
- I am responsible for reading and understanding every instruction given to me on this form in its entirety. If I have any question, I will seek the help of the Exchange Student Advisor at CSUF.

I acknowledge that I fully understand all the above statements and the above terms of participation. I certify that all of the information given in this application, and the attached Statement of Purpose, is complete and accurate to the best of my ability.

___________________________________      ___________________________________________          ________________
Applicant’s signature     Name of applicant     Date (month / day / year)