



AMERICAN LANGUAGE PROGRAM

California State University, Fullerton
2600 E. Nutwood Avenue, Suite 200
Fullerton, CA 92831-3145 U.S.A.
Telephone: (657) 278-8293
Fax: (657) 278-4700
Email: alp@fullerton.edu

APPLICATION FOR ADMISSION

Program (Which program(s) will you attend?)

- o Spring: March 10 - July 30, 2010
o Summer: June 1 - July 30, 2010
o Fall: August 16 - December 15, 2010
o Fall: October 6, 2010 - March 11, 2011

1. Student Information (Please print or type your information. Then, sign your name at the end of the form.)

Family Name: (As it appears on your passport)

Given Name:

Date of Birth: Month Day Year

Gender: Male Female

Marital Status: Married Single

Country of Birth:

Citizenship:

2. Mailing Address (the place where you want your I-20 and information sent)

Address: c/o IEC Online GmbH
Marienstrasse 19-20

City: Berlin

State/Province: Berlin

Zip/Postal Code: 10117

Country: Germany

Telephone: +49 30 20458687

Fax: +49 30 20458688

Email: info@ieconline.de

3. How did you hear about the American Language Program?

- o Website
o Travel Fair
o Past or present ALP student
o Family, friend or relative in the USA
o Agency IEC Online GmbH
o American Embassy / Consulate
o Advertisement

4. TOEFL or IELTS (Optional)

Date of Exam: Month Day Year

Score:

5. Permanent Address in your home country

Address:

City:

State/Province:

Zip/Postal Code:

Country:

Home Telephone:

Work Telephone:

6. Relative or Friend in the USA who we can contact (optional)

Name: Family Given

Relationship: (ex. friend, aunt, uncle, etc.)

Home Telephone:

Work Telephone:

Email:

7. Your Status

- Are you currently in the USA? Yes No
Are you a permanent resident or US Citizen? Yes No
Are you transferring from another US school? Yes No

If yes, tell us the school's

Name: _____

Telephone: _____

Fax: _____

IMPORTANT: If you are a transfer student or are on a tourist visa, please select one of the following:

- I plan to leave the USA before studying at the ALP.
- I plan to remain in the USA before studying at the ALP.

8. If you are married, will your spouse come with you to the US?

- Yes
- No

Name of spouse: _____
Family Given

Date of Birth: _____
Month Day Year

Country of Birth: _____

Country of Citizenship: _____

Will your children accompany you to the USA?

- Yes
- No

If yes, please complete the following:

Child #1:

Name of child: _____
Family Given

Date of Birth: _____
Month Day Year

Country of Birth: _____

Child #2:

Name of child: _____
Family Given

Date of Birth: _____
Month Day Year

Country of Birth: _____
(If there are more than 2 children, please provide information on a separate page.)

9. Housing

Students live in apartments. Many apartments are in walking distance to school. Some students live with families in a home-stay. Please check which kind of housing you are interested in:

- Homestay
- Private Apartment
- University Village Apartments

10. Source of Financial Support

- Scholarship
- Friend
- Parent/Family Member
- Personal Savings

Give financial support contact information

Name: _____

Address: _____

City: _____

State/Province: _____

Zip/Postal Code: _____

Home Telephone: _____

Work Telephone: _____

11. I certify that the above information is true and correct.

Student Signature: _____

Date: _____

Please print and sign this application and mail the original to ALP at the address on the front of this form. You will need to include your application fee, which is non-refundable. The fee is as follows and payable to CSUF-ALP:

- \$100 - if you are applying for ALP only.
- \$125 - if you are applying for ALP and Conditional Admission.

12. Declaration of Financial Sponsor

(The person who will pay for you must complete this.)

I, _____
(Please Print) Sponsor Family Name Given Name
certify that I will assume full financial responsibility for

(Student's name)
(including educational & living expenses in the amount of {choose one}):

- \$9,500 for 16 weeks
- \$20,100 for 2 sessions (36 weeks)
- \$5,100 for 1 summer (8 weeks)

while he/she is enrolled in the American language program at California State University, Fullerton.

Signature of Sponsor: _____

Date: _____
Month Day Year

Relationship to Student: _____

(example: Father, Mother, Aunt, Friend, etc.)