

GENERAL APPLICATION

APPLICATION PACKET CHECKLIST

- Complete the Study in LA Application Form (both pages)
- Submit copy/scan of bank statement and scholarship verification letter (if you have a scholarship).
- Submit copy/scan of passport information page (name, date of birth, citizenship, etc.).
- Submit copy/scan of home university transcript with English translation.
- Submit copy/scan TOEFL 61/IELTS 5.5/PTE 44 test results (no more than 2 years old) or DAAD B2.
- Submit copy/scan of housing application & license agreement for Study in LA Students.)
- Pay Application Fee (\$200)

Only complete application packets will be reviewed. Please submit all documents together in one package.

APPLICATION DEADLINES

<u>Term</u>	<u>Classes Start</u>	<u>Classes End</u>	<u>Application Deadline</u>
Fall Semester	August 22, 2016	December 10, 2016	April 1, 2016
Spring Semester	January 23, 2017	May 20, 2017	September 1, 2016

SUBMIT THE COMPLETED APPLICATION PACKET

By Mail

California State University, Los Angeles
International Office
Attn: Becky Bishop/Study in LA
5151 State University Drive, GE 217
Los Angeles, CA 90032-8619

By E-mail

bbishop@calstatela.edu
Subject Line: Study in LA Application

GENERAL APPLICATION FORM

Instructions: Please type your responses on the application, answering every question. Do not abbreviate. Write "n/a" if a question does not apply to you. After completing this form, please sign and date.

PERSONAL DATA

Indicate terms that you will participate in **Study in LA**, mark all that apply: Fall 20 ____ Spring 20 ____

Name _____
*As on your passport Last Name First Name Middle Name

Date of birth ____ / ____ / ____ Gender Male Female Phone ()

City of birth _____ Country of birth _____

Country of permanent residence _____ Country of citizenship _____

Mailing address _____
Street name and number Apt. # or Box

City _____ Province _____ Country _____ Postal code _____

Primary email _____ Alternate email _____

Have you have attached a copy of your current passport Yes No (If no, when will you send a copy?) ____/____/____

Have you have attached a copy of your TOEFL/IELTS score report Yes No (If no, when will you send a copy?)____/____/____

ACADEMIC PROGRAM INFORMATION

Home university _____ Transcript included? Yes No

Field of study at home university _____

Field of study at Cal State LA _____

APPLICANT'S SIGNATURE:

I certify that all information given above is true and correct. I fully understand the minimum amount of financial resources that I must provide for the duration of my studies at California State University, Los Angeles. I understand that providing false or misleading information can result in my disenrollment at California State University, Los Angeles.

Student Applicant's Signature

Date (month/day/year)

Participants must show proof that they have the available funds to support themselves for the entire length of the program at Cal State LA. **Study in LA** students are not eligible for financial aid through Cal State LA. Please keep in mind that your expenses will vary depending on your choice of accommodation and your personal spending habits. All expenses are the student's financial responsibility. Please note that students must demonstrate a minimum standard of financial resources in order to qualify for the immigration document issued by our office and the visa issued by the U.S. Consulate.

Estimated Semester Expenses (1 semester = 16 weeks - about 4 months)	
STUDY IN LA Tuition & Fees - Includes: 12 units of study; Mandatory Health Insurance; Student Health Center, USU Fitness Center; Orientation	Student's Financial Responsibility \$6,140*
On-campus housing and full meal plan	\$6,029*
Books, Supplies, Transportation, Phone, Clothing Laundry Entertainment, Personal	\$3,037*
Estimated Total (minimum cash needed in bank)	\$15,206*

* Cost subject to change without notice

SOURCE OF FINANCIAL SUPPORT

Indicate the amount of financial support in U.S. dollars each category available for the duration of your participation in the program.

Name _____
*As on your passport Last Name First Name Middle Name

Personal/family funds:	\$ _____	
Home University funds:	\$ _____	School Name
Government Funds	\$ _____	or Gov Agency: _____
Other funds:	\$ _____	Description: _____
Total funds available:	\$ _____	

CERTIFICATION OF FINANCIAL SUPPORT FROM SPONSOR - Your sponsor must complete this section. Sponsor's name must match the name on the bank statement.

"I guarantee that the sum of (U.S. dollars) \$ _____ will be available to _____ for his/her study at California State University, Los Angeles."
Student's name

Name of sponsor _____ Relationship to student _____

Address of sponsor _____

Sponsor's signature _____ Date _____

Bank Certification: 2 methods - Choose one 1) This section can be completed by a bank official OR 2) You may submit a bank statement on bank letterhead with the bank stamp or seal and bank official's signature.

Name of depositor: _____

Account type: Checking Savings Other _____

Current balance: \$ _____ in U.S. Dollars

Bank name: _____

Bank address: _____

Name of bank official: _____

Signature of bank official: _____

Bank Seal or Stamp (Required)