



California State University SAN MARCOS

Mail, Scan or Fax completed application to:
American Language and Culture Institute 333 S. Twin Oaks Valley Road San Marcos, CA 92096-0001
Tel: 760.750.3200 Fax: 760.750.3779 alci@csusm.edu www.csusm.edu/alci

HOW TO APPLY: Use the separate program checklist to make sure your application is complete. All documents must be in English. I-20s cannot be issued for incomplete, illegible, or unsigned applications. Applications that are missing documents or fees cannot be processed. Applicants should be 18 years of age or high school graduates. If you are under 18, a parent or sponsor must co-sign your application.

Personal Information – Print clearly. Do not use abbreviations.
Complete legal name, using information as it appears in your passport

Given (First) Name: _____ Family (Last) Name: _____
 Male Female Student's Email: _____
Date of Birth: _____ (mm/dd/yyyy) Country of Birth: _____ Country of Citizenship: _____

Permanent Residence Address Outside the United States

Address _____
City _____ Country _____ Postal Code _____
Phone (Country Code/Area Code/Number) _____

Mailing Address if different from residence address (for acceptance package/I-20)

Street Address (No P.O. Boxes) _____
City _____ Country _____ Postal Code _____

Program Choice- Check the box you want to enroll in:

Intensive English Pathway (IEP)

Study @ CSU San Marcos Major: _____ Undergraduate Graduate

Conditional Admission to CSU San Marcos Major: _____ Undergraduate Graduate

Students applying for Conditional Admission must apply through the [International Admissions Office](#)

Semester you want to start:

Summer (June) Fall (August) Fall 2nd Entry (October) Spring (January) Spring 2nd Entry (March)

How long do you plan to study: **Are you currently attending another language program/college/university in the US?**

1 term 2 terms 3 terms 4 terms No Yes _____
Name of institution

Signature

I certify that all applications information is true _____ Date: _____
Signature of Applicant (parent or guardian must sign if under 18) (mm/dd/yyyy)

For Referring Agency Only

Agency Name: _____ Contact Name: _____
Phone: _____ Email: _____ Fax _____



I-20 Application Do you need an I-20 for an F-1 student visa or school transfer?

Yes - Complete this Section No - Skip this section

TOTAL AMOUNT NEEDED: _____ * to calculate your amount please go to [Program Tuition, Student Fees, and Estimated Costs](#)

Source of Funds: Personal/own Parent/Relative Other (specify) _____

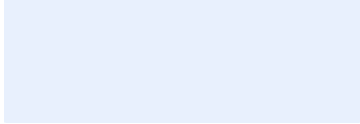
Official Bank Verification of Funds: You must submit a bank statement, printed in English, indicating the amount of funds available to you or ask your bank to complete this section. If you are sponsored by a company or organization, submit a letter of sponsorship on letterhead.

Name of Account Holder: _____

Name of Bank: _____

Bank Location: (City & Country) _____

Amount of Available Funds: (must equal or exceed the total amount needed in item (*) above): \$ _____



Official Bank Stamp or Seal

Date: (mm/dd/yyyy)

Name of Bank Official: _____ Title of Bank Official: _____

Signature of Bank Official: _____

Statement of Financial Support

The person who is financially responsible for you must read and sign the following statement: I have read the information regarding the cost of tuition and living expenses for the period of study at CSU San Marcos/ALCI. I certify that these funds are available and I accept full responsibility for these expenses. I fully understand that persons coming to the U.S. as students are expected to study full-time and no student should expect to work.

Name of Person Financially responsible (Print): _____

Relationship to Student: _____ Signature: _____ Date: _____

Family Members/Dependents: List all legal dependents who will come to the U.S. with you. Send a passport copy for each individual

1. Given (First) Name: _____ Family (Last) Name: _____ Date of Birth: _____

Country of Birth: _____ Relationship to you: Spouse Child

2. Given (First) Name: _____ Family (Last) Name: _____ Date of Birth: _____

Country of Birth: _____ Relationship to you: Spouse Child

Application Fee Payment

The ALCI application fee and proof of finances/financial guarantee must be submitted before the I-20 is issued. Application fees are non-refundable. Intensive English Pathway students should pay a program deposit within two weeks of admission. If you do not receive a visa, please contact the ALCI .

\$150 ALCI application and express mail fee only. Required for all IEP and Study@CSU San Marcos applicants.

Note: if you are applying for Conditional Admission, go to the [International Admissions website](#)

App fee of \$55 will be required if you are applying for Conditional Admission

Payment Method

Credit Card (service fee will apply)

Go to: [Flywire](#) Note: Please notify your credit card provider that you are making an international transaction

I will send a wire transfer (service fee will apply)

Go to: [Flywire](#)

Check or, money order in U.S. dollars payable to "CSUSM ALCI". Check and money

orders must be draw on a U.S. bank or a U.S. branch office of your bank. Do not mail cash.