International Programs Application

Student Legal Name (as it appears on passport)

Student Legal First Name: _____

Student Legal Middle Name: _____

Student Legal Last Name: _____

Student Lived Name

Student has a lived name   ☐Yes ☐No

If yes:

Student Lived First Name: _____

Student Lived Middle Name: _____

Student Lived Last Name: _____

Student Address in Home Country

Permanent Address:

Country: _____

Street: _____

City: _____

Region: _____

Postal Cofe: _____

Mailing Address:

Country: _____

Street: _____

City: _____

Region: _____

Postal Code: _____

Is this student currently living in the U.S?　　☐Yes　☐No

Email Address

Email Address: _____

Student Telephone Numbers

Student Home Phone Number: _____

Student Cell Phone Number: _____

Student Biographical Information

Student Legal Sex: ☐Male ☐ Female

Gender: ☐ Male ☐ Female ☐ Non-binary

Student Birthdate: _____

UC San Diego Student

Has this student ever been enrolled in a UC San Diego undergraduate, graduate or Summer Session program? ☐ Yes ☐ No

Student Citizenship Information

Primary Citizenship: _____

Dual Citizenship: _____

U.S. Permanent Resident: ☐ Yes ☐ No

Country of Birth: _____

City of Birth: _____

Country of Legal Permanent Residence: _____

Visa Reason:
☐ Initial F1-Visa
☐ F1 - School Transfer
☐ F1 – Change of status

Program Information

Program Group:

☐ University Credit Program

Program Name:

☐ University and Professional Studies Track 1
☐ University and Professional Studies Track 2
☐ **University and Professional Studies Track 3**

Program Dates

☐ Fall 2024 (September – December)
☐ Winter 2025 (January – March)
☐ Spring 2025 (March – June)

Academic History Form

School 1

Institution: _____

Start Date (MM/YYYY): _____

End Date (MM/YYYY): _____

Level of Study:
☐ ESL
☐ High School

☐ Undergraduate
☐ Graduate

Degree: _____

Graduation Date: _____

School 2

Institution: _____

Start Date (MM/YYYY): _____

End Date (MM/YYYY): _____

Level of Study:
☐ ESL
☐ High School
☐ Undergraduate
☐ Graduate

Degree: _____

Graduation Date: _____

Dependents Form

Is the student bringing a dependent (wife or husband and/or children) on F-2/J-2 visas

☐ Yes ☐ No

Emergency Contact

Relationship to the student: _____

First Name: _____

Last Name: _____

Phone Number: _____

Country: _____

Street: _____

City: _____

Region: _____

Postal Code: _____

Financial Verification Form

What kind of financial verification will you be using?

        ☐ Bank Statement
        ☐ Sponsorship Letter
        ☐ Both

Is that bank statement under the student's name?
        ☐ Yes ☐ No

Name of Account holder/s: _____

Amount of available funds: _____

Application Fee Payment ($225)

Method of Payment: ☒ Credit/Bank Card

Credit/Bank Card Details:
Cardholder's Name: _____

Credit Card Billing Address: _____

        _____

Credit Card Number: _____

Expiration Date (MM/YYYY): _____

CVV2: _____

Credit Card Type:

        ☐   Visa
        ☐   Mastercard

      ☐ American Express
      ☐ DISCOVER

Cardholder's email address: _____

Cardholder's Signature: _____

Applicant's Signature

I hereby permit College Contact to submit the information which I have provided on this form to UC San Diego Extended Studies via an electronic online application form created and maintained by UC San Diego Extended Studies.

☐ Yes

I certify that the above information is true and correct.

_____   _____

Signature   Date