

Non-Degree Seeking Student Application International Transitory Student

This application should be utilized by international students who intend to take courses at California State University, San Bernardino as a non-degree seeking student. This is not an application for admission to a degree program at the university. If you intend to enroll for regular admission to the university, you must apply to CSUSB using the application at www2.calstate.edu/apply; pay the \$70 USD application fee. You will also need to submit official transcripts from all institutions you have previously attended. For more information, please contact International Admissions at (909) 537-5288.

Applicant Information

This application is for the following term: Fall Spring Year: Terms Attending: One Two

Legal Name (as shown on passport):

Last/Family Name: First/Given Name:

Other name(s) that may appear on your academic records:

Last/Family Name: First/Given Name:

Country of Citizenship: Country of Birth:

City/ Place of Birth: Gender: Male Female

Home Country Permanent Address (*required):

Street Number/Name:

City: State: Zip Code: Country:

US Home Address (if applicable):

Street Number/Name:

City: State: Zip Code:

Home Country Telephone Number (required; please include area code and/or country or city code)

Home: Cell:

US Telephone Number (if applicable):

Home: Cell:

Email Address: Date of Birth (MM/DD/YYYY):

Class Level (Choose One)

If you choose 2nd bachelor's degree or Graduate Student please attach a copy of bachelor's degree with this application.

Freshman
 Sophomore
 Junior
 Senior
 2nd Bachelor's Degree
 Graduate Student

Choice of Program/Cohort Program

If you are currently in a specific program such as the National Student Exchange, Fulda, etc., please indicate below the program:

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Previous Institutions

Please list in chronological order from most recent date of attendance.

Institution	Country	Date From (MM/YYYY):	Date To (MM/YYYY):

College currently attending or last attended:

Current Major at home institution:

Intended/ Interest major at CSUSB:

High School Information

Institution Attended	Country	Date From (MM/YYYY):	Date To (MM/YYYY):

Did you graduate high school? Yes No High School Graduation Date:

Emergency Contact Information

Please list up to 5 people to contact in case of an emergency (list in the order you want them to be contacted).

Name	Relationship	Home Phone Number	Cell Phone Number
1.			
2.			
3.			
4.			
5.			

Return Application To:

Return the completed form by **one** of the following options:

1. **Email:** to international@csusb.edu
 - a. Must be scanned as a PDF attachment. Our office will not accept picture copies or emails with pictures embedded in the body of the email.
2. **Fax:** 909-537-7020 (Attn to: International Admissions)
2. **Mail: International Admissions**
Center for Global Innovation, Room 301
California State University, San Bernardino
5500 University Parkway
San Bernardino, CA 92407

Signature (required)

Applicant's Printed Name: _____

Applicant's Signature: _____

Date: _____

Signed at (country): _____

Welcome to the Pack!

