

**American University Services**  
1100 East State Street  
Athens, Ohio 45701 USA  
**Telephone:** 740.594.4841



## **Application for International Students**

### **Section A: Enrollment**

Applying for:

- Spring Semester (January) 2012/2013 school year
- Summer Semester (May) 2012/2013 school year
- Fall Semester (August) 2012/2013 school year

Seeking Degree:  Bachelor  Master's  Doctorate  Medical Fellowship  English Only

Major:

### **Section B: Personal Information**

Please write your name as it appears in your passport.

Family Name:

First Name(s):

Middle Name:

E-mail Address:

Date of Birth: Day:                      Month:                      Year:

Gender: Male:                      Female:

Place of Birth: City:                      Country:

Country of Citizenship:

Passport No.:                      Issuing date:                      Expiration Date:

### **Section C: Student's Home Country Address**

Street Address:

City:

Province/Country:

Postal Code:

Telephone:

Email:

**Section D: Mailing Address**

This is the address to which your acceptance package will be mailed.

Street address:

City:

Province/Country:

Postal Code:

Telephone:

Email:

**Section E: Dependent information**

If you intend to bring dependent(s) with you, please provide the following information for each dependent:

	Last Name	First Name	Middle Name / Middle Initials	Date of Birth DD-MM-YY	Country and City of Birth	Country of Citizenship	Gender M/F
Spouse							
Child							
Child							
Child							
Child							
Child							

**Section F: Educational Background**

Master's Major:      **GPA:** (      /      ) (for example 4.0/5) If applicable.

Undergraduate Major: business administration **GPA:** (      /      ) (for example 4.0/5).

List the most recent high schools, and/or all colleges and universities you have attended:

Name of School or Institution	City/State/Country	Date Attended			Graduation date	Major and Degree
		Mo. Yr.		Mo. Yr.		
			To			
			To			
			To			
			To			

**If you have taken any of the following tests, please report score and test date.**

TOEFL:                      Score:                      Date:  
 GRE:                        Score:                      Date:  
 GMAT:                      Score:                      Date:

(Include copies of test score reports, if available).

**Section G: Career Experiences**

List your previous work experience or past short courses and training programs attended in the past:

Company OR Institution	Job Title OR Short Course Name	City/State/Country	Date Attended		
			Mo. Yr.		Mo. Yr.
				To	
				To	
				To	
				To	

**Section H: Recommendations**

List of recommenders

Name	Institution
1.	
2.	
3.	

Waiving the right to view letters of recommendation:

- I wave the right.
- I don't wave the right.

**Section I: Emergency Contact**

In the case of an emergency, whom should we contact?

Name:

Relationship:

Phone:

Email:

**Section J: Student Visa**

- What type of Visa are you currently holding?
  - None
  - Student (F-1)    Exchange (J-1)    Visitor (B-1/B-2)    Other:
  
- Currently, which Country are you living in?

