



Scan or mail completed application to:
Study @ CSU San Marcos, 333 S. Twin Oaks Valley Rd. ELB 588, CA 92096-0001
Tel: 760.750.3200 alci@csusm.edu www.csusm.edu/alci

HOW TO APPLY: Use the 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 handwritten or missing information/fees cannot be processed. Applicants should be 18 years of age and high school graduates. If you are under 18, a parent or sponsor must co-sign your application.

<p>Personal Information: Use the fillable option only. No abbreviations. Complete legal name, as shown on your passport.</p> <p>Given (First) Name: _____ Family (Last) Name: _____</p> <p><input type="checkbox"/> Male <input type="checkbox"/> Female Student's Email: _____</p> <p>Date of Birth: _____ Country/City of Birth: _____ Country of Citizenship: _____ (mm/dd/yyyy)</p>	
<p>Permanent Residence Address Outside the United States:</p> <p>Address _____</p> <p>City _____ Country _____ Postal Code _____</p> <p>Phone (Country Code/Area Code/Number) _____</p>	
<p>Mailing Address if different from residence address (for acceptance package/I-20):</p> <p>Name: _____ Email Address: _____ Phone: _____</p> <p>Street Address (No P.O. Boxes) _____</p> <p>City: _____ Country: _____ Postal Code: _____</p>	
<p>Program Choice: Check the box you want to enroll in:</p> <p><input type="checkbox"/> Undergraduate Major: _____</p> <p><input type="checkbox"/> Graduate Major: _____</p> <p>Semester you want to start: <input type="checkbox"/> Fall (August) <input type="checkbox"/> Spring (January)</p> <p>Document Checklist:</p> <p><input type="checkbox"/> This Application <input type="checkbox"/> Passport <input type="checkbox"/> Financials <input type="checkbox"/> Transcript <input type="checkbox"/> English Test Scores</p>	
<p>How long do you plan to study: Are you currently attending college/university in the US?</p> <p><input type="checkbox"/> 1 term <input type="checkbox"/> 2 terms <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
<p>Signature</p> <p>I certify that all application information is true _____ Date: _____</p> <p style="text-align: center;"><small>Signature of Applicant (parent or guardian must sign if under 18)</small></p>	
<p>For Referring Representative Only:</p> <p>Agency Name: _____ Contact Name: _____</p> <p>Phone: _____ Email: _____</p>	



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: _____ Calculate your amount here: <https://www.csusm.edu/global/alci/datesandcosts/index.html>

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 letter.

Name of Account Holder: _____

Name of Bank: _____

Bank Location: (City & Country): _____

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

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. If you do not receive a visa, please contact the ALCI.

\$150 (ALCI application fee only)

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 drawn on a U.S. bank or a U.S. branch office of your bank. Do not mail cash.