ApplyTexas Application International Transfer Admission

THIS APPLICATION SHOULD NOT BE USED BY U.S. STUDENTS.

You are encouraged to complete this application online at https://www.applytexas.org. This application is intended for use in applying for Academic Year 2019-2020.

Write in the name of the college or university to which you are applying. On the line below the institution's name, write in your first-choice and second-choice majors. You can find the majors and codes/abbreviations online at https://www.applytexas.org, or on institution websites.

	Institution:	
	Maior:	(Semester/Year)
	Major:(Major Name-First Choice)	(Major Name-Second Choice)
PA	ART I. BIOGRAPHICAL INFORMATION	
1.	U.S. Social Security Number*:*Please enter your Social Security number if you have test scores, and for financial aid.	ve one. It is used to match your application to your transcript and
2.	When were you born? (Required): Enter your date of birth (Month/Day/Year). Do not le	(mm/dd/yyyy) eave blank; this information is required.
3.	Enter your full legal last, first, and middle name. Do	e your full legal name on all documents sent to the institution to
4.	Preferred first name:	
5.	Other names or aliases: If you attended school using a different name or took TOEFL) using a different name, please list name(s):	a standardized college entrance exam (for example, SAT, GRE,
6.	Place of Birth (Required): (City)	
	(City) Citizenship Information:	(State) (Country if not U.S.)
7.	 (a) Of what country are you a citizen? (b) Do you hold Permanent Resident status If "Yes", please submit a copy of both side If "Yes," date permanent resident card with 	s (valid I-551) for the U.S.? Yes No es of the card. h 4 digit year: / Alien Number**:

8.	Permanent Address (Required):				
	Street Address:				Apt #
	City: C	county:	State: _	Zip:	Country:
9.	Physical Address (Current street add as your Permanent Address, leave t Street Address: City: C	his question blank	. .)		
	City: C	county:	State: _	Zip:	Country:
10.	Phone Numbers: Preferred Phone (Required): Alternate Phone ()				
11.	. Emergency Contact (Required): NameMrMrs	Ms			
	Street Address	(La	st Name/Family	Name)	(First Name)
		v·	State:	Zin	
	Country:Phone:	E-mail for Em	nergency Cont	act:	
12.	. Student e-mail address (Require				
13.	. The Ethnicity and Race question	does not appl	y to Internatio	nal Applica	nts.
14.	Your gender:Male	_Female			
PA	ART II. EDUCATIONAL BACK	GROUND			
15.	You are applying as an Internation I am seeking a first bach I am seeking a second bath I am applying as a non-common None of the above.	elor's degree. achelor's degre	•	pplicant. (Ple	ease check only one answer.)
16.	. High school or secondary schoo	l you graduate	d from or expe	ect to gradua	ate from (Required):
	(Complete name of high school or	secondary school)			
	(City)	(Country, if r	not in the U.S)		
	(State) High School Code: Are you home-schooled? (Re Date graduated or expect to go you have a GED or have	equired) graduate: MM	_Yes! () Y	No YYY ()

you have attended or an (Required only if studen institutions will be con an official transcript ser	e attending, including college- at has college credit earned wh sidered an intentional omissi	(Required): Please list ALL previous colleges or universities evel correspondence study and dual credit ile still in high school). Failure to list all on and may lead to forced withdrawal. Have ou apply. Please send an official transcript from
all schools listed.		
Name of College 1:	~	College Code:
City:	Country: _	/37
	(Month)	
	(Month)	
		Degree Date:
Type of Degree:		
Name of College 2:		College Code:
City:	Country	Conege Couc.
Dates attended from:	(Month)	(Year)
	(Month)	
Hours earned:	Major/Area of Study:	Degree Date:
	_ Wajoi/Mea of Study.	Begiee Bate.
Type of Begiee.		
Name of College 3:		College Code:
City:	Country:	
Dates attended from:	(Month)	(Year)
	(Month)	
Hours earned:	Major/Area of Study:	Degree Date:
		Begiee Bute
Type of Begiee.		
18. Are you currently on ac	ademic suspension from	the last college or university attended? Yes No
10.1110 your continuity on we	adding suspension from	
PART III. EDUCATION	INFORMATION	
	pre-professional program, physical therapy, pharma	please specify which one (e.g., pre-law, medicine, acy, other).
PART IV. TEST SCORES	S	
	ken or plan to take. Please universities to which yo	se have official test scores sent directly from the ou apply.
ACT – Date taken o	or plan to take:	(Month/4-Digit Year)
SAT – Date taken o	r plan to take:	(Month/4-Digit Year)
	n or plan to take (if your (Month/4-Digit Yea	native language is not English): ar)
IELTS – Date taker	or plan to take (if your i (Month/4-Digit Yea	native language is not English): ar)

PART V. EXTRACCURICULAR AND VOLUNTEER ACTIVITIES

Please list, in priority order, the organizations, activities, jobs and internships that indicate your special contributions, talents, honors and abilities in the areas of extracurricular activities, service and work. Include service and work done in the summer. Please spell out the names and describe the organizations in which you have participated.

Extracurricular Activities	Your Position/Year	Were you elected to this	Lord	Description of Activities		s Per Week (3/32 = three week/32 week	e hours	per
Organization <u>Examples:</u> Speech/Debate Club	<u>Examples:</u> Committee Chair/senior	position? (circle	Level Examples Regional	Examples: Hosted Speech	Fresh. 3/32	Soph. 3/32	Jr.	Sr.
Extemporaneous Speaking	Captain/junior	Yes or No)	Local	Tournament Played Forward	5/16	5/16	6/32	6/32
		yes/no				_	_	
		yes/no					_	
		yes/no				_	_	
		yes/no			_	_	_	
		yes/no				_	_	
		yes/no					_	
		yes/no				_	_	
		yes/no			_	_	_	
		yes/no			_	_	_	_
Community on Websets	Si	yes/no				_	_	
Community or Volunteer	Service							
Service/Volunteer Wo			escription of S		I	From-Thro		Total Hours 120
<u>Examples</u> : Habitat for Hospital V		He	<u>campies</u> : Heip elped nurses an	oed build houses ad visited patients		6/15-8/1		112
					_		_	
					_		_	
					_		_	
					_		_	
					_		_	
					_		_	
					_		_	
					_		_	

Talents/Awards/Honors

Award, Honor, Distinction	Description, Basis, Sponsor	Level	Year Received				
Examples:	Examples:	Examples:	Fresh.	Soph.	Jr.	Sr.	
Voice	Sang in school choir	Regional	X	X	X	**	
Regional Qualifier (Speech)	1 of 3 chosen for regional team (UIL)	State			X	X	
All-State Basketball Team	1 of 5 in state chosen for first team				X	X	
					—	_	
						_	
				_		_	
				_	_	_	
				_	_	_	
					_	_	
				_		_	

PART VI. SUMMARY OF EDUCATIONAL EXPERIENCE

We wish to obtain a chronological record of your school attendance, beginning with your first year in school through your current school, including the kind of schools you attended, the certificates you earned, the examinations you passed, and your graduations. By doing this carefully and correctly much unnecessary, time consuming, and expensive correspondence can be avoided.

Column one represents your years in school; begin with the first year. There is one line for each year.

In column two and three, fill in the calendar years you attended each school.

In **column four**, write your age. Perhaps you were five years old when you entered your first year of school, so type 5 in the appropriate column; continue by putting your correct age for each of the subsequent levels attended.

In column five, type in the name of the level or class of each year. Use the terminology of the country where the school was located. Do not try to translate into American terminology.

In **column six**, type in the kind of school you attended, using the terminology of the country where the school was located. **Do not try to translate into American terminology.**

In **column seven**, type in the name of any examinations you passed or certificates you earned at the end of the school year. For example, if you completed secondary school at the end of your twelfth school year, type the name of the final document you received. **Do not try to express the name of any document in the American equivalent.**

Summary of Educational Experience

Year in school	Month/Year (from)	Month/Year (through)	Age	Class Level	Type of School (Primary, Secondary, University, etc.)	Certificates, Diplomas or Degrees Earned
1^{st}						
2^{nd}						
3^{rd}						
4^{th}						
5 th						

PART VII. PRELIMINARY VISA INFORMATION

Immigration Status

If you are admitted, additional information regarding your immigration status is required. Upon submission of your electronic application, you will be sent a "Certification of Financial Responsibility" form to complete and return to the school to which you are applying. If you are, or will be, in F-1 or J-1 status, evidence of adequate financial support is required for issuance of an immigration document (Form I-20 or Form DS-2019).

This information is NOT required for consideration of your application for admission but may be required prior to initial enrollment.

Are you currently residing in the U.S?Yes No
Current U.S. residents complete the following:
If you are currently residing in the U.S., please identify your current visa type:
If an expiration date is indicated on your form I-94, please enter it: Month Year
Will you require a change in your visa status?Yes No Unsure
If you are already in the U.S., do you plan to leave the U.S. before enrolling at the university to which you are applying?YesNo If yes, approximate date of travel: MonthYear
If you will require a change in your visa status, what type of visa is expected? Student (F-1) Visa or Exchange (J-1) Visa
Expected source of financial support if you are, or will be, in F-1 or J-1 status: Personal or family funds Government or private sponsor (include full name of sponsor): Other (please specify source):
What is your marital status? Married Single

Dependent Information

List the following information for all dependents who will require immigration documents to accompany you to the U.S. (including your future spouse, if you plan to marry before traveling to the university).

List spouse and children's name(s) as they appear in the passport.

Please note: the certification of financial responsibility must include sufficient support for your dependents.

Spouse's Full Legal Last/Family Name:
First/given name:
Middle name:
Date of birth: (MM/DD/YYYY)
City of birth:
Country of birth:
Country of citizenship:
Child 1 Legal Last/Family Name:
First/given name:
Middle name:
Date of birth: (MM/DD/YYYY)
City of birth:
Country of birth:
Country of citizenship:
Child 2 Legal Last/Family Name:
First/given name:
Middle name:
Date of birth: (MM/DD/YYYY)
City of birth:
Country of birth:
Country of citizenship:
Child 3 Legal Last/Family Name:
First/given name:
Middle name:
Date of birth: (MM/DD/YYYY)
City of birth:
Country of birth:
Country of citizenship:
Child 4 Legal Last/Family Name:
First/given name:
Middle name:
Date of birth: (MM/DD/YYYY)
City of birth:
Country of birth:
Country of citizenship:

Application Representative

U.S. law (Family Rights and Privacy Act of 1974) prohibits universities from releasing information about you to anyone else. If you want someone besides yourself to be able to discuss your file with the target university's admissions office, please fill in information below:

Application Representative Infor	mation	
Representative Title:	(Mr, Mrs, Ms, Miss)	
Representative Name:		
Phone Country Code:		
Phone		
Address:		

PART VIII. CUSTOM QUESTIONS FOR THIS INSTITUTION

*** Custom questions vary depending on the college or university being applied to.

PART IX. ESSAYS

Institutions do not require all four essays. See "General Application Information" at: http://www.collegeforalltexans.com/apps/publications/ to determine if you are required to write an essay or essays as part of your application for admission. Unless otherwise specified, your essay(s) should be typed and be no longer than one page (8 ½"x11"). Please put your name and Social Security Number at the top of each page. Essays should include 500-750 words.

Topic A.

The statement of purpose will provide an opportunity to explain any extenuating circumstances that you feel could add value to your application. You may want to explain unique aspects of your academic background or valued experiences you may have had that relate to your academic discipline. The statement of purpose is not meant to be a listing of accomplishments in high school or a record of your participation in school-related activities. Rather, this is your opportunity to address the admissions committee directly and to let us know more about you as an individual, in a manner that your transcripts and other application information cannot convey.

Topic B.

If you are applying as a former student and were suspended for academic reason, describe briefly any actions you have taken to improve your academic abilities and give reason why you should be readmitted. If you are applying as a non-degree seeking or post baccalaureate applicant, briefly describe the specific objectives you wish to accomplish if admitted, including the courses in which you would like to enroll.

Topic C.

There may be personal information that you want considered as part of your admissions application. Write an essay describing that information. You might include exceptional hardships, challenges, or opportunities that have shaped or impacted your abilities or academic credentials, personal responsibilities, exceptional achievements or talents, educational goals, or ways in which you might contribute to an institution committed to creating a diverse learning environment.

Topic D.

The essay in this section is specific to certain institutions and majors. It is not required by most colleges/universities that accept the ApplyTexas Application. Please see the "General Application Information."

PART X. CERTIFICATION AND PAYMENT INFORMATION

Certification of Information

You are required to read the statement below. By checking the box next to the statement you are agreeing to the terms and conditions laid out in the statement. If you do not check the box next to the statement, you will not be allowed to complete or submit this application.

□ Notification of Rights under Texas Law: Information collected about you through this application may be held by any institution of higher education to which you apply. With few exceptions, you are entitled on your request to be informed about the collected information. Under Sections 552.021 and 552.023 of the Texas Government Code, you are entitled to receive and review the information. Under section 559.004 of the Texas Government Code, you are entitled to correct information held by an institution that is incorrect. You may correct information held by any institution to which you apply by contacting the institution. The information that is collected about you will be retained and maintained as required by Texas records retention laws (Section 441.180 et seq. of the Texas Government Code) and rules. Different types of information are kept for different periods of time. The Texas Higher Education Coordinating Board, or its authorized representative(s), has permission to contact you regarding your ApplyTexas application and/or regarding related educational outreach purposes (including, for example, to make you aware of financial aid opportunities) using any of the contact information for communication methods (email, mail, phone, mobile, text message, social media, or automated telephone dialing equipment). Your information will not be sold for commercial purposes.

☐ I certify that I have read and understand the	New	Requirements	and	Important	Information	about
Bacterial Meningitis						

□ If my application is accepted, I agree to abide by the policies, rules and regulations at any college to which I am admitted. I authorize the college to verify the information I have provided. I certify that the information I have provided is complete and correct and I understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment and/or appropriate disciplinary action. I understand that officials of my college will use the information submitted on this form to determine my status for residency eligibility. I authorize the college to electronically access my records regarding the Texas Success Initiative. I agree to notify the proper officials of the institution of any changes in the information provided.

Non-discrimination clause

Admission to any of the Texas institutions of higher education and any of their sponsored programs is open to qualified individuals regardless of race, color, gender, sexual orientation, creed, age, national origin or disability.

Application Fee

Application fees are listed in the "General Application Information," at http://www.collegeforalltexans.com/apps/publications/. Include the student's name and Application ID number on your check or money order. Check the website of the institution(s) to which you are applying to see if credit card payment of the application fee is also accepted. Students with financial need should check with their high school counselor or the institution(s) to which they are applying for information concerning a possible waiver of the application fee (i.e., college application fee waiver).