California State University, Chico

Exchange Application Instructions



Application Deadlines:

Fall Semester: March 15 Spring Semester: October 1

Given processing times at consulates to issue visas, students are strongly recommended to apply and submit all supporting documents early.

General Application Checklist (additional requirements may be found on Chico TREK account):

- Completed and signed application
- o DS-2019 request form
- Financial support documentation
- Copy of signed passport bio page
- Official transcript of academic record¹
- Proof of English language proficiency
- o Course Request Form

Instructions & Notes:

- Download this form and open with **compatible PDF viewer** to submit electronic signature or download, print, sign and scan completed application. Note: electronic signatures may not be submitted via online web browser (Safari, Google Chrome, etc.).
- Complete digitally-signed electronic forms may be submitted along with scanned images of supporting documents as e-mail attachments to exchange@csuchico.edu.
- Application materials can additionally be sent by post to the California State University, Chico Study Abroad & Exchange Office.
- (1) Applicants must submit a hard copy of an original academic transcript.

Financial Requirements:

You must provide proof of financial sponsorship for educational and personal expenses while in the US to cover all expenses for one year or one semester, excluding summer enrollment.

English Proficiency:

All undergraduate applicants who have **not** completed three years of academic study at the secondary level or above in Anglophone countries (English spoken in the home) must submit evidence of English language proficiency.

We accept a TOEFL or TOEFL MyBest score of 61ibt/500pb, IELTS band score of 6; or English faculty language assessment from a home university.

Note:

This application is for students currently attending a California State University, Chico Partner Institution ONLY. If your University does not have a partnership with Chico State, please contact the International Admissions Office at International Education & Global Engagement for more information about applying to study at Chico State.

CALIFORNIA STATE UNIVERSITY, CHICO

International Exchange Student Application - J-1 visa students

5. 2nd Bachelor's, Bachelor's or equivalent completed

only Mailing Address: Study Abroad & Exchange Office Your name as Last/Family Name California State University, Chico shown on your 400 W First Street, Chico, CA 95929-0680 passport: First/Given Name Phone: +1 530-898-5415 Fax: +1 530-898-6889 E-mail: exchange@csuchico.edu Website: http://www.csuchico.edu/studyabroad/exchange/index.shtml Middle Name Female Fall & Spring Date of Birth (mm/dd/yy) Male Period of Study Fall Spring Year *Country of Citizenship City & Country of Birth List All Applicable Name as shown on transcripts or test scores, if different: Address information: We need your permanent and your mailing addresses. The permanent street address is required if you are admitted to Chico for issuance of the DS-2019 form. The permanent address **CANNOT** be a U.S. address, it must be in your home country. Permanent street address Mailing address Mailing address Permanent street address Mailing City Permanent City Postal Code Postal Code Mailing State/Province Permanent State/Province Mailing Country Permanent Country Telephone Numbers (include country code) **Email Address (es):** All correspondence during the admission process will be via email. Be sure to list an email address where you can receive emails with an @csuchico.edu extension. If you change your e-mail address please be sure to notify us immediately. List the primary e-mail address first if you have more than one. E-mail Address(es): **Major:** Please refer to the University Catalog for a list of bachelor degree Major programs. Select "Undergraduate" career and "Major" program type. Not all programs are open to Exchange students, such as "Nursing" and "Music -Option Recording Arts". Inquire with the Study Abroad & Exchange Office for current restrictions. Class Level - Select one: 0, First-Time Freshman no college coursework after high school 3, Junior, less than 3 but more than 2 years of study completed Complete based on 1, Freshman transfer, less than 1 full year of study completed 4, Senior, less than 4 but more than 3 years of study completed the number of units you plan to have

completed when you enter 2, Sophomore, less than 2 but more than 1 year of study completed

Chico State

Degree Objective: All exchange applicants are admitted as non-degree seeking student	s. Degree progress at students' home university will be determined by an
advisor and/or faculty at their home university.	

Home University:

Educational History: List all colleges/universities attended. Include the name of the institution and the country where it was located and dates you attended mm/yy to mm/yy. Completion of high school is required for admission.

Required: Did you graduate

from high school? Yes Date of Graduation (mm/yy) No Explain

Name of School/College/University	Country where located	Dates of Attendance mm/yy to mm/yy	Level of study and degree earned high/secondary school, college, university

University/College Courses in progress or planned: Directions: if you are applying for a fall semester list courses you will complete in the prior spring and summer terms, all other courses must be received on an official transcript. Ex: Applying for fall 2014 list spring and summer 2014 courses below, courses taken fall 2013 and before must be received on an official transcript. If you are applying for a spring semester list below the courses you will complete in the prior fall semester, all other courses must be received on an official transcript. Ex: Applying for spring 2015 list below courses planned fall 2014, all other courses must be on an official transcript.

Name of College or University ex. XYZ University	Course # & Title ex. MATH 2111, Calculus	Term ex. Fall 2022	# & type of Units/Credits ex. 4 credits/ECTS

Full name as shown on application:		In	alifornia State Univer Iternational Exchange isa Students Only	• '
Evidence of adequate funds to meet the fina Homeland Security for issuance of a DS-2019 Check https://www.csuchico.edu/studyabroad/e	. Please complete this form in f	ull using U.S. dollars when I		J.S. Department of
	e select ct responses:	Applicant C Graduate Applica	nt	
Funds for First Year and source of funding while st (Check appropriate boxes)	udying at CSU, Chico			
Your own funds (complete sections A, C, and	see Bank Verification of Funds**)	U.S. \$		
Funds from parents, relatives, or private spo Bank Verification of Funds**)	nsor (complete all sections, and see	U.S. \$		
Government or private scholarship, attach loof study, major, billing address, addressed to	U.S. \$			
Section B: Financial Certification of Sponso Name of Sponsor	r (If sponsored by a parent, relative,	or other private source: complet	e this section or submit le	tter from sponsor)
Sponsor's Guarantee: "I guarantee the funds ind education at California State University, Chico an the student will not become a public charge."			•	•
Confirm with signature or by typing in your name:			Date signed	
**Bank Verification of Funds				
If you have a private sponsor (parent, relative, appropriate bank, in English, that confirms the originate from outside the U.S. please include	y/you appear financially capable of	meeting the commitment of fur	nds promised in Section A	above. If the funds
Section C: Signature of Applicant - required	d			
"I fully understand the amount of money necessal California State University, Chico and I certify the	• •	l educational and living expense	s while attending	
Confirm with signature or by typing in your name:			Date signed	

English Language Proficiency: Evidence of English language proficiency is required of all students whose native language (language spoken in the home) is other than English. We accept TOEFL(500pb/61ibt) or IELTS (6.0) score; 3 years of study in an English speaking country at the secondary level or higher; or a letter from an English professor. I have evidence of English language proficiency. Select and complete the appropriate selection Native speaker or 3 years of academic study at secondary level or higher from an English-speaking country. Name of Country: Qualifying TOEFL score Date mm/dd/yy Listening Reading Speaking Writing Total score Qualifying IELTS score Date mm/dd/vv Listening Reading **Speaking** Writing Overall score Letter from English faculty of home univeristy confirming academic proficiency equivalent to minimum TOEFL/IELTS scores necessary for successful performance at the univeristy. How did you hear about Chico? Why did you apply to Chico? Yes No **Disability Support Services:** (optional) If you have a physical, developmental, or learning disability, would you like information regarding available services? **CERTIFICATIONS:** Please read these carefully and then sign if you can agree to these statements. Health Insurance: If admitted I agree to purchase a policy offered through the University Health Center upon and provide proof upon my arrival. I understand that failure to provide such proof will prevent enrollment or cause my disenrollment from classes. The use of my home country insurance, or comparable policy, in lieu of CSU, Chico insurance, may be considered upon advance requestTo fulfill this condition of my enrollment, I must show proof of insurance coverage for accident and illness with a minimum of \$100,000USD, provision for medical evacuation with a minimum of \$50,000USD and provision for repatriation of a deceased insured person with a minimum of \$25,000USD. Accuracy of Application: I certify under penalty of perjury that I have provided complete and accurate responses to the items on this application. I further certify (swear) all official documents submitted by me in connection with this application are authentic and unaltered records that pertain to me. I authorize release of any information submitted by me in connection with this application to any person, firm, corporation, association, or government agency but only to verify or explain the information, obtain pertinent records, or in connection with perjury proceedings. I understand that any misrepresentation may be cause for denial or cancellation of admission or enrollment. I understand that my signature is certification of the accuracy and completeness of the information I have provided. Physical or digital signature Date (mm/dd/yy) Location where signed

Student Exchange Request for Form DS-2019

Certificate of Eligibility for Exchange Visitor (J-1) Status California State University, Chico



Male Female

1. Surname (last):										
2. Given name:										
3. Date of birth:					4. Cit	ty where I	was bor	'n		
4. Country where I w	as born					5. Citi	zenship			
6. Country of Perma	nent Legal Ro	esidency	'			•				
7. I have the following	ng university	degree(s)							
8. Occupation (what you do) in your country										
9. When do you intend to arrive in the US?										
10. When do you intend to leave the US?										
11. What is your primary reason for coming to Chica			co?							
(a) I will be a student in (major field)										
(b) I will be a Professor or Research Scholar in the academic field of										
(c) I will be a Short-term Scholar in the academic field of										

SOURCE OF FUNDS

12. Provide proof of adequate funds for your stay at California State University, Chico. The DS-2019 will not be issued without official proof of funding. (\$7,700USD for each semester of study)

SOURCE OF FUNDS	AMOUNT US\$	PROOF
Personal/Family funds		Provide Bank Letter or current bank statement
Your Government or University		Provide official statement
United States Government		Provide official statement
Other (name)		

Student Exchange Request for Form DS-2019

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HEALTH, ILLNESS AND ACCIDENT INSURANCE COVERAGE

13. The United States Department of State, Exchange Visitor Program requires a J-visa Exchange Visitor to be insured from the moment of arrival in the US to the time of departure.

	lifornia State University, Chico alth & Accident Insurance Coverage Agreement fo	or I-1 Visa Holders
I (y	our full name): Agree that as a condition of participation up	der the Exchange, I will purchase the Universite
up use	alth and accident insurance through Internation on my arrival on campus. Failure to comply	onal Education & Global Engagement immediately may lead to termination of my Exchange. The cry insurance, or comparable
fo	Insurance coverage must provide minimum is cident and illness, US\$25,000 for repatriation of a medical evacuation. Each accompanying deposered.	n injured or deceased person, and US\$50,000
	pur signature: By signing/typing your name you agree	Date:
	By signing/typing your name you agree	to the terms above.
rec arr	AVEL INSURANCE: If you are not bringing insurance commended that you carry travel insurance valid for ival.	or at least one month from the date of
15. Wr	ite your name as it appears in your passport:	
16. Ad	ldress for your postal mail:	
17. My	telephone number 18. My	FAX number
19. My	e-mail address (write clearly):	
Please r	return this form to exchange@csuchico.edu, or:	
MAIL:	Attn: Kenya Chavez	FAX:
	International Education & Global Engagement	Attn: Kenya Chavez Fax No: +1 530 898 6889
	California State University, Chico 400 West First Street Chico, CA 95929-0680	Telephone: +1 530 898 5415