

Return this completed application and requested materials to the Ahlers Center for International Business at the University of San Diego, School of Business Administration, 5998 Alcalá Park, San Diego, CA 92110 USA. Contact Tara Jankowski if you have questions, phone +1.619.260.6809, fax +1.619.260.4198, email: tjankowski@sandiego.edu. Also see our website at <http://www.sandiego.edu/business>

University of San Diego School of Business Administration
EXCHANGE PROGRAM APPLICATION

IDENTIFICATION

Please list your exact legal name as it appears on your passport:

Name _____
Last Name First Name Full Middle Name

Permanent Street Address _____

City, State, Zip Code _____

Home Phone _____
Country Code City Code Number

E-mail Address _____ Fax Number _____

Male Female Marital Status: Married Single

Languages Spoken _____

Business/Employer (if currently working) _____

Business Street Address _____

City, State, Zip _____

Business Phone _____
Country Code City Code Number

ACADEMIC INTERESTS

I am applying as an exchange student for Fall Spring Intersession Summer _____
Year

If you have attended USD previously, please indicate USD ID number and Academic Term:

List the USD course(s) in which you would like to enroll (12 units maximum):

Course Number and Title	Number of Units
_____	_____
_____	_____
_____	_____
_____	_____

ACADEMIC INFORMATION

University or Academic Institution _____

Degree sought at home school _____ Mo./Yr. of expected graduation _____

Area of Emphasis _____

STATEMENT OF INTEREST

Briefly, please state your primary reason for wanting to attend the University of San Diego as an exchange student.

EMERGENCY INFORMATION

If you were to require medical attention while abroad is there any information we will need to know? _____

Do you require any medications or have any allergies? Please list _____

_____ Blood Type: _____

Please provide the following emergency contact information:

Name _____ What relation is this person to you? _____

Home Phone _____

Country Code _____ City Code _____ Number _____

Work Phone _____

Country Code _____ City Code _____ Number _____

HOUSING INFORMATION

I prefer to seek my own accommodations in San Diego. (Please see <http://www.sandiego.edu/housing>)

I would rather live in university housing if it becomes available.

ADVISOR'S AUTHORIZATION

To be completed by the Academic Exchange Program Coordinator at your university or academic institution.

I authorize _____ to participate in the exchange program that exists between the University of San Diego and our academic institution.

(STUDENT)

Furthermore, I certify that this student possesses the English skills necessary to participate effectively in the exchange program. I have confirmed this by _____ interview _____ TOEFL score.

Date _____ Name _____ Academic/Exchange Coordinator signature _____

AGREEMENT

I understand that Exchange Student Status limits me to enrolling in a maximum of twelve (12) semester units. I understand that this admission is temporary only and places me in an unclassified graduate student status and does not imply in any way formal admission to the University of San Diego. I also understand that I must meet the full formal application requirements if I plan to pursue formal graduate study for a specific degree at USD in the future.

I understand the terms of the contractual exchange agreement between USD and the exchange institution in which I am enrolled.

I understand that exchange students are not eligible for any form of USD financial aid.

I certify that the information on this application is true to the best of my knowledge. I have read all the instructions and limitations. I understand that refusal of admission or cancellation of registration will result from misrepresentation in any portion of this application form.

STUDENT SIGNATURE _____

DATE _____