

Montana State University International Exchange Application

Attach passport
photo here

In order to insure accuracy and facilitate the registration and immigration process, please type all information in the provided fields before printing and signing this document. This application must be reviewed and signed by the International Coordinator at your home institution or your application will not be considered. Thank you.

Name:

Last (family or surname)

First (given)

Middle

Present Address: valid until / / (mm/dd/yyyy)	Permanent Address if different: (mail will be sent here after date given at left)
Telephone:	Telephone:
Email:	Email:

Sex (X one box):	<input type="checkbox"/> Female	<input type="checkbox"/> Male
Date of birth: / / (mm/dd/yyyy)	Citizenship:	
Place of birth: (City) (Country)	Legal permanent resident of:	

Person(s) to contact in case of emergency:	
Name:	
Address:	
Telephone:	
Relationship to you:	

Highest degree completed or in progress at HOME institution:	
Major field:	Minor field:
Principal field(s) of study during exchange:	
Including this semester, I have attended college/university for _____ semesters.	
Study during the exchange is desired at the (X one box):	
<input type="checkbox"/> undergraduate (B.A. or equivalent) level	<input type="checkbox"/> graduate/postgraduate level

Duration of exchange (X one box):	<input type="checkbox"/> One semester	<input type="checkbox"/> Two semesters
Beginning semester (X one box):	<input type="checkbox"/> Fall (late August to mid-December)	<input type="checkbox"/> Spring (mid-January to mid-May)

REQUIRED SAFETY AND SECURITY INFORMATION

Have you been convicted of a felony (serious crime)? ____ Yes ____ No

Have you been institutionalized for threatening or causing physical or emotional injury to persons or property?
 ____ Yes ____ No

Have you been dismissed and/or suspended from a college for a disciplinary (non-academic) reasons?
 ____ Yes ____ No

Have you ever been required to register as a sexual or violent offender? ____ Yes ____ No

Please note an affirmative response to any of these questions will not automatically prevent admission, but you will be required to provide additional information. We are committed to campus safety.

PROPOSED COURSE OF STUDY

Please refer to the semester schedule for the FIRST semester you will be attending MSU and list the classes you request. You will be required to take a minimum of 12 credit hours per semester. Please include the class abbreviation, name, and control number (Crn) and at least four alternate choices. The complete semester schedule and course catalog are available on the MSU website at: <https://atlas.montana.edu:9000/>
(Please be sure to select the correct semester under term)

The following items must be submitted along with this form for your application to be considered:

- Please type all information into the required fields before printing and signing this document
- One official transcript of your academic work completed so far
- Two letters of reference from faculty (professors, advisors) who are familiar with your academic work
- One essay in English introducing yourself (approximately 500 words, see guidelines below)
- One passport-size photo (attach to first page of this application)
- One photocopy of the personal information pages of your passport

Guidelines for the 500-word essay

In a clear, thoughtfully prepared essay, introduce yourself and present your reasons for wanting to study abroad. Use this essay to tell us any of your strengths and special interests that may not be evident in other materials you have submitted. Explain your motivation and why studying abroad will be beneficial to you. Refer to such things as your educational achievements, intellectual and personal interests, and career goals. Include your reasons for choosing the study abroad site you have selected. Finally, briefly describe the academic work you have completed at your home institution, including your field(s) of interest.

I acknowledge that all the statements on this application form are complete and accurate to the best of my ability. I am aware that my signature below authorizes Montana State University to release an official transcript of my studies to my home university at the end of my exchange.

Applicant's signature

Date

To be filled out by the program coordinator at student's home institution

This student has been nominated as a candidate to participate in the exchange program between Montana State University-Bozeman and:

Home institution: _____

Name & Title
of administrator: _____

Signature & Seal: _____ Date: _____



Susan Welker–
Study Abroad Manager
400 Culbertson Hall P.O. Box 172260
Bozeman, MT 59717-2260
swelker@montana.edu
(406) 994 5719

Financial Admission

Complete legal name:

Last of Family Name

First or given Name

Middle or Maiden Name

Permanent Address:

Street and Number

City or Town

Country

Postal Code

Check the box below if you plan to take advantage of employment opportunities on campus.

Campus Employment U.S. \$2,000 can be included as a mean of support on your I-20 if you agree to work at least 10 hours per week on campus during the Academic

Sponsor's Statement

Your application for admission will not be considered unless both statements below are completed.

I, _____ do hereby guarantee that

Name of Sponsor

Name of Student

*Will have a **minimum** of \$4,500 four thousand five hundred U.S. Dollars.*

For each Academic semester to pay for room and board expenses that this person is a student at Montana State University. The student should be prepared to additionally cover books and the cost of living.

Montana State University will provide an institutional contribution and waive tuition for each academic semester that this person is on exchange at MSU.

Date and Signature of the Sponsor:

Applicant's Statement

I certify that all statements on this form are true and accurate, and that funds will be provided as specified above. I will notify Montana State University of any changes in my financial circumstances or that of my sponsor. I understand that, should I be admitted and register, failure on my part or that of my sponsor to provide the needed funds will result in the cancellation of my registration and termination from the undergraduate program at Montana State University.

Date and Applicant's signature

**REMINDER: Keep a copy of this document for your records. It may be necessary to show verification of financial status at your port of entry.*

** Please send with official bank statement showing significant funds.*