



PERSONAL INFORMATION

Please note: Your information on this application must match your information as it appears on your passport.

1. Legal Name

First/Given Name(s)

Last Name/Surname

2. Preferred Name

What do you like to be called?

3. Date of Birth

mm/dd/yyyy

4. Gender

Male

Female

Our admissions system currently only recognizes Male and Female gender. If you would like the opportunity, we invite you to share more about your gender identity and pronouns:

5. Email

6. Cell phone

7. Permanent Address (Home Country)

8. Semester You Wish to Begin

Fall (September)

Spring (January)

9. Exchange Period

Fall Semester

Spring Semester

Academic Year

Calendar Year (January–December)

RESIDENCY INFORMATION

10. Are you a U.S. citizen?

Yes (go to #11)

No (complete A-D below)

A. Country of Citizenship

B. City of Birth

C. Country of Birth

D. Country of Legal Permanent Residence

11. Are you currently living in the US?

No (go to #12)

Yes (complete A-B below)

A. Visa Type (only if you are currently living in the U.S.)

Non-immigrant Visa → → Please list type of visa (e.g., F-1, J-1):

Permanent Resident/Green Card (go to #12)

Other (please list):

B. For students already in the U.S. (or who will be in the U.S. on a different visa immediately prior to UMN program):

SEVIS Number

Institution That Issued Your Initial Visa

Date You Entered the U.S. (mm/dd/yyyy)

12. Will you be accompanied by family members eligible for dependent visas (your legal spouse or any unmarried children under the age of 21)?

Yes (if yes, supplementary form must be requested)

No

## EDUCATIONAL BACKGROUND

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**13. School in which you are now enrolled.** If none, check here:

Name of School

Location of School (City/Country)

**14. Your status at this school is:** Undergraduate Student Graduate Student Professional Degree Student

## ENGLISH PROFICIENCY

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**15. Is English your native language?** Yes (go to #17) No

**16. Are you now enrolled in an English language program?** Yes No

If yes, where?

**17. Please check all English language proficiency tests taken. Attach copy of report(s).**

CAE C1 Advanced	Year	TOEFL iBP	Year	PTE Academic	Year
IELTS Academic	Year	IELTS Indicator	Year	Duolingo	Year

## COLLEGE/MAJOR CHOICE

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**18. College and Major**

Intended College Intended Major

If you are not admitted to your first choice, would you like to be considered for a different major and college?

**19. Second Choice**

2nd Choice College 2nd Choice Major

## DATES OF EXCHANGE PROGRAM

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Indicate below the dates the exchange program will begin and end. Students may enter the U.S. up to 30 days before the "Program Start Date" indicated on the I-20. Each F-1 visa holder is allowed an additional 60 days at the end of the program to travel and prepare for departure from the U.S.

**Start Date (MM/DD/YYYY)**

**End Date (MM/DD/YYYY)**

## ADDITIONAL INFORMATION

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**20. Have you ever been expelled from, suspended from, or placed on probation at any high school, college, or university for academic dishonesty or sexual misconduct?** Yes No

**21. As an adult or juvenile, have you been found legally responsible for a sexual offence, or do you have any sexual offense charges pending at this time?** Yes No

# FINANCIAL CERTIFICATION STATEMENT

U.S. Citizenship and Immigration Service regulations require the University of Minnesota (UMN) to maintain records showing you have met its financial, academic, and language proficiency requirements. You must complete all the information on this form before the UMN will issue your I-20. Complete this form carefully to avoid lengthy delays that may affect your academic plans.

## EXPENSES

<b>EDUCATIONAL EXPENSES - billed to your UMN student account</b>	
Tuition - <i>paid for by exchange agreement. Amount may differ depending on credit load.</i>	\$
Student Fees	\$
Health Insurance - <i>students are required to purchase the UMN Student Health Benefit Plan</i>	\$
<b>LIVING EXPENSES - paid out of pocket</b>	
Housing + Meals - <i>students living in UMN housing will be billed through UMN student account</i>	\$
Books	\$
Miscellaneous	\$
<b>TOTAL EXPENSES</b> \$ <input type="text"/>	

## SOURCES OF FUNDING

<b>22. Personal Funds</b> ( <i>Funds from accounts in your own name</i> )	\$
<b>23. Exchange Agreement</b> ( <i>Provided based on the exchange agreement between your host institution and UMN</i> )	\$
<b>24. Family Funds</b> ( <i>Funds from family members</i> )	\$
<b>25. Loans</b>	\$
<b>26. Scholarships</b>	\$
<b>TOTAL FUNDING</b> \$ <input type="text"/>	

***Total funding must meet or exceed total expenses.***

### By signing below, you agree to the following statement:

The information provided on this form is true, and it correctly reflects my plans to meet my expenses while attending the University of Minnesota. I take financial responsibility for all my educational and personal expenses should my source of funding specified above be interrupted or stopped; the University of Minnesota accepts no responsibility for my financial needs.

27.

Applicant's signature (type name)

Date (MM/DD/YYYY)

## SUPPLEMENTAL DOCUMENTS

**28.** In addition to this form, please submit the following items. Further instructions can be found on [the Incoming Exchange Student website here](#).

- Official transcripts and official English translations of your transcripts
- English language proficiency test scores (if applicable)
- Copy of passport ID page

## PRIVACY AND ACCESS TO YOUR FILE

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**Privacy statement:** All information on the application form is private. Information requested will be used for identification, to determine admission, and to establish your University academic record if you are admitted. Failure to provide the information may delay or affect the admission decision. Information will be shared with offices within the University for the uses described above and may be released to outside and government bodies in limited circumstances as authorized by the applicant or by state or federal law.

**Special notice regarding release of information in the application:** The University of Minnesota may request University staff, faculty, alumni, and/or students to assist you with questions concerning the University and to provide you with additional information. This would be done under the direction of the Office of Admissions staff. The type of information that may be released includes name, address, phone number, classification (freshman or transfer, major, and most recent educational institution attended). If you wish to not receive this service, please attach a letter to your application indicating your preferences in this matter. Signing below gives permission to the University of Minnesota to share my contact information with Carlson students, fellow incoming exchange students, and your home institution including, but not limited to, academic, financial, and disciplinary records while enrolled at the University of Minnesota. If you wish to opt out of any of these releases, email [exchgin@umn.edu](mailto:exchgin@umn.edu) directly. Choosing not to share may disqualify accepted to the UMN Program.

**Photographic Likeness Release:** I authorize the Regents of the University of Minnesota, the Carlson Global Institute and their respective employees, agents, members, and representatives to record and/or use appropriately obtained photographs or other portraits or likenesses of me while participating in Carlson Global Institute events on videotape, audiotape, film, photographs or any other medium and use, reproduce, modify, distribute, and publicly exhibit such recordings, in whole or in part, without restrictions or limitation for promotional purposes. I further consent to the use of my name, voice and biographical material in connection with such recordings. I release the University of Minnesota, its successors and assigns, agents, and all persons for whom it is acting from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the recording process, or any unintentional misspellings or inaccuracies and waive any right that I may have to inspect or approve the finished recordings. If due to private circumstances I cannot allow the use of my likeness, I can officially notify the Carlson Global Institute of such, in writing, and that request will override this release. If you would like to opt out of this, please email [exchgin@umn.edu](mailto:exchgin@umn.edu) directly.

**By signing this form, you agree to the following statements:** "I certify that all statements made on this application and all other application materials are complete, true, and accurate to the best of my knowledge. I understand that misrepresentation or fraudulent information is sufficient ground for canceling my admission or registration. I further understand that failure to promptly notify the Office of Admissions, as required on the residency information page, or any criminal charge or conviction prior to enrollment is sufficient grounds for canceling my admission or registration. I understand that the University of Minnesota may release my name, email address, and phone number to current and potential exchange students."

29.

Applicant's signature (type name)

Date (MM/DD/YYYY)

**30. If you wish to allow the University of Minnesota to give information about your application file or admission or scholarship status to a person other than yourself (such as a parent, relative, or friend), please list the name(s) and relationship:**

Name(s)

Relationship to You