

**Application for Form I-20**

**Personal Information**

Name: \_\_\_\_\_  
*Last First Middle*

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: ☐ Male ☐ Female  
*MM DD YYYY*

Country of Birth: \_\_\_\_\_ Country of Citizenship: \_\_\_\_\_

Foreign Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_  
*City Province/Territory Postal Code Country*

U.S. Address: \_\_\_\_\_  
*Street Address Apt/Suite #*

\_\_\_\_\_  
*City State ZIP Code*

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_  
*Students Students Mothers*

Fathers WeChat ID: \_\_\_\_\_ WeChat ID: \_\_\_\_\_

**Program of Study (This section must be completed by a school administrator.)**

Name of School: \_\_\_\_\_ City: \_\_\_\_\_

Full Year Tuition: \_\_\_\_\_ Estimated Living Expenses: \_\_\_\_\_  
**\* International students cannot be granted any type of scholarship, financial aid or tuition waiver by the school.**

Program Start Date: \_\_\_\_\_ Start of Academic Classes: \_\_\_\_\_

Grade Upon Entry: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

Is English proficiency required? ☐ Yes ☐ No Does the student have the required proficiency? ☐ Yes ☐ No

Is the student applying through a third-party agency? ☐ Yes ☐ No

Name of the third-party agency: \_\_\_\_\_  
**\* Schools can only work with agencies that are registered with the Office of the California Attorney General.**

**I certify that all the information above is true and correct to the best of my knowledge.**

\_\_\_\_\_  
*Title Printed Name Signature Date*