



INTERNATIONAL STUDENT APPLICATION BOOKLET
APPLICATION FOR ADMISSION

Today's date (mm/dd/yyyy)

OFFICE USE ONLY:
NAID #:
SEVIS ID:
SSN#:

This application must be typed, word-processed or printed legibly in ink. A non-refundable \$100 administrative processing fee and \$35 state application fee paid in United States Dollars (USD) must accompany this application.

VISA INFORMATION (check the one visa type you will be applying for)

Student (F-1) Dependent of Student (F-2)

STUDENT DATA

Family/Last/Surname First Middle Other

Complete permanent address City Province/Territory Postal code Country

Telephone number with country code

E-mail address

Date of birth GENDER: Female Male

Country of birth Country of citizenship:

Have you ever lived in the U.S.? YES NO If yes, explain when, where, and why:

If not a U.S. citizen, are you a permanent resident? YES NO

If YES, give alien registration number

When do you plan to enter Mayville State? 20 Semester: Fall Spring

Have you attended Mayville State University before? YES NO If YES, what year did you attend?

PARENT GUARDIAN SPOUSE (check correct relationship) DATA

Family/Last/Surname First Middle Other

Mailing Address City Province/Territory Postal code Country

Parent telephone number with country code

Parent E-mail address

What other language(s) do you speak?

**PLACEMENT TEST SELF-REPORTED INFORMATION:**

Have you taken the SAT or ACT test?  YES  NO

SAT Score: \_\_\_\_\_ Date of test: \_\_\_\_\_ ACT Score: \_\_\_\_\_ Date of test: \_\_\_\_\_  
(mm/dd/yyyy) (mm/dd/yyyy)

**STUDY PLANS AT Mayville State University**

Major	Degree

Briefly explain your reasons for wanting to earn a degree at Mayville State University. Please add any information you think is important for us to know about you. Add more space or paper if necessary.

**EDUCATION**

List names of high school, college, polytechnic, university, and training institutions you have attended in the past or are presently attending:

**List the name of most recent institution FIRST**

Name of Institution	Location	Dates attended From To (mm/dd/yy)	Degree/Diploma/ Certificate	Date received or expected

Do you plan on participating in varsity athletics at Mayville State University?  YES  NO

If YES, in which sport(s) do you plan to compete? \_\_\_\_\_

**CERTIFICATION**

*"I certify that the information given on this application is complete and accurate to the best of my knowledge, and I agree to comply with any necessary regulations and to return to my home country upon the expiration of my studies in the United States of America."*

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date signed*

**OPTIONAL INFORMATION:**

*This information is requested for statistical purposes only and will not affect the status of your application. The information will not be used in a discriminatory manner and your response is voluntary. Personal information given is confidential.*

**RACE**

Other race(s) not listed \_\_\_\_\_  Latino/Hispanic/Non-Black  Caucasian/White

American Indian/Native Alaskan  African American/Black/African  Asian/Pacific Islander



INTERNATIONAL STUDENT APPLICATION BOOKLET
APPLICATION FOR SCHOLARSHIP

STUDENT DATA

Family/Last/Sur name First Middle Other

Complete permanent address City Province/Territory Postal code Country

Telephone number with country code

E-mail address

PARENT GUARDIAN SPOUSE DATA (check correct relationship)

Family/Last/Sur name First Middle Other

Mailing address City Province/Territory Postal code Country

Telephone number with country code

E-mail address

Parent telephone number with country code

Parent's E-mail address

When do you plan to enter Mayville State? 20 Semester: Fall Spring

Entry status: Beginning freshman international International transfer Current student\*

\*If current MSU international student, circle year status: 1 2 3 4

Name and location of high school:

Please explain why you think you should be considered for a scholarship (use more space or paper if necessary):

CERTIFICATION

I give permission to Mayville State University to release my financial and academic information to scholarship committees for the sole purpose of scholarship consideration. The scholarship committee may use this information to determine my scholarship eligibility. I also authorize Mayville State to send news of any scholarship award to area news media.

Signature of Applicant

Date signed

PLEASE NOTE: New students must have an application for admission on file before they can be considered for scholarships. Incoming freshmen and transfer students must submit most current transcripts from all schools to MSU. Applications must be postmarked no later than April 1 for priority consideration of fall scholarships. 3

OFFICE USE ONLY Term to enter ACT/SAT: GPA: Scholarship offered



INTERNATIONAL STUDENT APPLICATION BOOKLET
APPLICATION FOR HOUSING (ROOM & BOARD)

OFFICE USE ONLY:
PeopleSoft ID #
SSN#:

STUDENT DATA

Send \$50 USD Room reservation deposit (non-refundable) as soon as you have been accepted. Scholarship requires dormitory residence.

Female Male

Family/Last/Sur name First Middle Other

Complete permanent address City Province/Territory Postal code Country

Telephone number with country code

E-mail address

PARENT GUARDIAN SPOUSE DATA (check correct relationship)

Family/Last/Sur name First Middle Other

Mailing address City Province/Territory Postal code Country

Telephone number with country code

E-mail address

Parent telephone number with country code

Parent's E-mail address

Emergency contact:

MORE STUDENT INFORMATION

Classification at MSU: Freshman International Student Transfer International Student Other

When do you plan to enter housing at Mayville State? Year 20 Semester: Fall Spring

Do you require special room accommodations for physical or health reasons? If necessary, use more space or paper.

FOOD International students initially accept a 19-meal per week food plan, but may change the plan within the first week of each semester. Meals not used during each week are lost.

Please indicate your academic major:

CERTIFICATION:

I have read the general policies as outlined in the General Application Procedures and am willing to accept a room and board agreement in advance with such policies.

Signature of Applicant

Date signed

OFFICE USE ONLY:

R #: Amount: Date: Entered: Verified:
Payment plan: Hall: Room: Phone: Room type: