

**GRADUATE INFORMATION FORM: INDEPENDENT STUDENTS**

MAIL THIS COMPLETED FORM DIRECTLY TO THE INTERNATIONAL CULTURAL STUDIES  
GRADUATE CERTIFICATE PROGRAM

Proposed Semester of Enrollment: ☐ Fall 20\_\_ ☐ Spring 20\_\_ Student ID/Social Security No. \_\_\_\_\_

Full Legal Name: \_\_\_\_\_  
Family/Last First Middle

Current Mailing Address City/Province State/Country Zip/Postal Code

Telephone: ( \_\_ ) \_\_\_\_\_ FAX: ( \_\_ ) \_\_\_\_\_ E-mail: \_\_\_\_\_

Citizenship: ☐ USA ☐ Other \_\_\_\_\_  
Specify Country  
☐ US Perm Res/Immigrant-Citizen of \_\_\_\_\_

**REFERENCES**

Name of Academic Reference #1: \_\_\_\_\_ Phone: ( \_\_ ) \_\_\_\_\_

Name of Academic Reference #2: \_\_\_\_\_ Phone: ( \_\_ ) \_\_\_\_\_

Name of Academic Reference #3: \_\_\_\_\_ Phone: ( \_\_ ) \_\_\_\_\_

**DEGREE(S) AWARDED/EXPECTED**

**Bachelor's Degree**

University/College: \_\_\_\_\_ State/Country \_\_\_\_\_

Date Awarded: \_\_\_\_\_ Program of Study: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

**Master's Degree**

University/College: \_\_\_\_\_ State/Country \_\_\_\_\_

Date Awarded: \_\_\_\_\_ Program of Study: \_\_\_\_\_ Grade Point Average: \_\_\_\_\_

**STANDARDIZED TEST INFORMATION**

(For Foreign Applicants only – Minimum score allowable: 540)

TOEFL: Score \_\_\_\_\_ Date: \_\_\_\_\_

**FINANCIAL INFORMATION**

☐ Payment of tuition and fees via self, sponsor or family funds. ☐ Need Financial Aid assistance.

**ATTACHMENTS**

☐ Personal Statement (*maximum two pages*) ☐ THREE Letters of Recommendation  
☐ ONE Writing Sample ☐ ONE copy of transcript from each university/college attended

I certify that the information given on this form is complete and correct to the best of my knowledge and belief.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_