California State University, Monterey Bay Western Undergraduate Exchange Contract



Last Name:	lame: First Name:					Middle Initial:					
CSUMB Otter ID:		Student ID#:				Date of Birth:					
								•		DD/MM/YYYY	
Current Mailing Addres	ss:		Str	 eet		City	Sta	ate Zip			
Permanent Address:								-			
			Str	eet		City	St	ate Zip			
Phone Number: ()		Em	ail:							
Name of last institution	n attended (hi	gh school or co	llege	e):							
Please indicate the sen	nester and yea	ar to which you	are	applying fo	r admi	ssion: Fall		Spring	S		
Please indicate your sta	ate of legal res	sidency below:	(che	eck one)			Yea	r		Year	
	_	Colorado		Hawaii		Idaho		Montana		Nevada	
□ New Mexico □ N		S. Dakota		Oregon		Utah				Wyoming	
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WUE Anni BY SIGNING BELOW I A	Resident tuit Tuition and Lal WUE Savi *does no	tion and fees fees (calculat ings = \$9,168 t include roor	(calo ed f * m ar	culated for for 16 units and board	^ 16 ur s) = \$4	nits) = \$8,9 -,349.50/Se	emeste	er*	BIDE	BY CSU, MONTEREY	
BAY's GUIDELINES Student's Signature							Da	te			
For Office Use Only:	Received by	y:				Date:					
□ Scanned	□ Checkli	ist Item Added		□ C	hecklis	t Item Com	pleted				

Revised 11/26/2013