

Marienstrasse 19/20, D-10117 Berlin Tel. +49 (0)30-20458687 www.ieconline.de

EXCHANGE STUDENT APPLICATION FORM

Name:			
Address:	Surname/Family	Given/First	Middle
Str	reet	City	State
	ip/ Postal Code E-r	Country mail Address:	
Sex: (M or F)	Birthdate:/	/ (Month/Day/Year)	
Are you a New York stat	te resident? (Y or I	N) Are you a US Citizen?	(Y or N)
If no, Country of Citizen	ıship:	Country of Legal Permanent	Residence:
•	en, but you <u>are</u> a permane	ent resident of the US, please pr	ovide your alien
City of birth:		Country of birth:	
I am currently attending			(my home college/university).
I am studying			(my major[s], minor[s])
I plan to study at The Co and/or describe below)	ollege at Brockport for the	e: Fall Semester / Spring Semest	eer / Academic Year (circle one
A. Have you been convicte	ed of a felony (serious crime)	If the answer to A or B is yes, please ?	
		rrect and complete. I understand the ree status does not constitute admi	nat any misrepresentation may result ssion to a degree program.
Signature:	Date:		
students will receive a pa	cket in the mail (to the ac	ational Education and once produces provided on this form) wernational student insurance, and	hich will include information

Please forward this form to your nominating Exchange Office.

Please direct your questions to:

DS-2019 form, which is the document necessary for your J-1 Visa application.