



**PERSONAL DATA** (please type or print clearly)

Mr.     Ms.     Mrs.

First/Given Name: \_\_\_\_\_

Middle Name/Initial: \_\_\_\_\_

Last/Family Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Gender:  Male     Female

Date of Birth (mm/dd/yyyy): \_\_\_\_\_

Citizen of \_\_\_\_\_

Home Address: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Telephone Number (include country and city codes): \_\_\_\_\_

Fax Number (if available): \_\_\_\_\_

**ACADEMIC INFORMATION**

University Name: \_\_\_\_\_

University Address: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_ Year in School     1     2     3     4

Projected Graduation Date (mm/yyyy): \_\_\_\_\_ Cumulative GPA\*: \_\_\_\_ out of \_\_\_\_\_ TOEFL Score\*\*: \_\_\_\_\_

**\*Official Transcript must be submitted**

**\*\*TOEFL Score required** (minimum 86 IBT) or IELTS (minimum 7 overall). **As J-1 students, if you do not have a TOEFL or IELTS score, you will be able to interview via SKYPE with our Coordinator of English Language and Communication. This is a new governmental requirement.**

**ENROLLMENT INFORMATION**

I am applying as a:

- Visiting Student (Undergraduate)
- Exchange Student (Undergraduate)

I am applying for:

Fall 20 \_\_\_\_\_

**Deadline: April 30th**

Spring 20 \_\_\_\_\_

**Deadline: September 15th**

Summer 20 \_\_\_\_\_

**Deadline: February 1st**

I am applying for:

- One semester
- Academic Year



**STEVENS**  
 INSTITUTE of TECHNOLOGY  
 THE INNOVATION UNIVERSITY

**ACADEMIC INFORMATION Cont'd** (please type or print clearly)

**Name:** \_\_\_\_\_

**Institution:** \_\_\_\_\_

**Intended Program of Study:** \_\_\_\_\_

**Course Selections** (List the courses you are interested in taking at Stevens. Course listings and descriptions available at [www.stevens.edu/sit](http://www.stevens.edu/sit) )

Primary Courses

Alternate Courses

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

This section to be completed by your university's International Programs Advisor:

**International Programs Advisor:** \_\_\_\_\_

**Family Name**

**First/Given Name:**

**E-Mail:** \_\_\_\_\_

Telephone Number (include country and city codes): \_\_\_\_\_ **Fax:** \_\_\_\_\_

Do you endorse this student's Study Abroad Application?     Yes                       No

Describe the student's level of English competency and preparedness: \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_