



CityUniversity

of Seattle

INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

Application Checklist

Students from countries other than the U.S. who wish to study in the U.S. must complete this application. Please submit this form with:

- Nonrefundable application fee of \$50.00;
- Official English Proficiency test scores (if available);
- Official transcripts and diplomas with certified English translation (if applicable);
- Copy of passport ID and U.S. visa pages (if applicable);
- Copy of I-94 if currently in the U.S.;
- Consent to Release Information form (if applicable).

International (F-1) student visa applicants please submit:

- Financial Declaration form;
- Current Bank Statement;
- Sponsor letter (if applicable);

F-1 Transfer Students please submit the following items:

- Copies of all I-20s previously held (student page and endorsement page);
- Completed International Student Transfer Evaluation Form;
- Copy of Employment Authorization Document (if applicable).

In addition, dependents must submit:

- Copy of passport ID page and expiration page;
- Spouse: copy of marriage certificate with certified English translation (if applicable);
- Dependent child: copy of birth certificate with certified English translation (if applicable).

Send applications to:

City University of Seattle
International Student Office
521 Wall Street
Seattle, WA 98121
U.S.A.

Contact Information:

Phone: 1.206.239.4720

Fax: 1.206.239.4725

Email: iso@CityU.edu



INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

FOR OFFICE USE ONLY
Receipt No.
Date: Advisor:
Immigration Status:

PART A - STUDENT INFORMATION

1. Name: Last (Family) First (Given) Middle
2a. Student's present US address or mailing address abroad
2b. Student's permanent home-country address: (P.O. Box not acceptable)
3a. Student's phone:
3b. Student's phone:
3c. Fax:
3d. Student's e-mail:
4a. Country of birth:
4b. Country of citizenship:
5a. Date of birth: Month Day Year
5b. Male Female
5c. Single Married
6. City University of Seattle Student ID# (If none, leave blank)
7. Current English placement score available? TOEFL IELTS iTEP PTE Other Not available

PART B- PROGRAM INFORMATION

2. Check the quarter you wish to begin:
Fall (October; orientation mid September)
Winter (January; orientation beginning of January)
Spring (April; orientation mid March)
Summer (July; orientation end of June)
Year
3. Program of study (Please check academic program and ELP for conditional admittance with English testing upon arrival)
English Language Program (ELP)
B.A. in Management (2)
B.S. in Business Administration (General Management) (2)
Master of Business Administration (M.B.A.) (1)
Global Management Project Management
Global Marketing Finance
Doctor of Business Administration*
Master of Science in Computer Science
M.S. in Project Management*
M.A. in Counseling*
Marriage, Couple and Family Counseling
Clinical Mental Health Counseling
Graduate Certificate*
Marketing Project Management
Other

(1) Available in language assisted format.
(2) Minimum of 45 transferable quarter credits required.
*Fall Quarter start only and English proficiency required
SP5708 09.12.17

PART C – PRIOR EDUCATION

List only colleges or universities that will supply transcripts to City University of Seattle at your request. Official transcripts from these colleges or universities must be sent to City University of Seattle in sealed institutional envelopes. All transcripts must be official (original or certified copies of original) documents. Translations, if necessary, must be certified by the U.S. Consulate, Ministry of Education or the institution itself.

College/University	Location	Attendance (from - to)	Certificates/Credits Degrees Received	Date Transcripts Requested	Check if Enclosed
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	_____	_____	<input type="checkbox"/>
High school: _____	Location: _____	Date Completed: _____			<input type="checkbox"/>

PART D – U.S. VISA INFORMATION *(To be completed only by applicants currently residing in the U.S.)*

I currently have an F-1 Visa:

I will keep my current visa status and plan on:

Remaining in the U.S. Leaving the U.S. before starting my program at City University of Seattle

Date first granted F-1 status: _____

If applicable,
Optional Practical training authorized from: _____ to _____

Curricular Practical training authorized from: _____ to _____

International Student Transfer Evaluation Form requested from your current advisor?

Yes Date: _____ No

I currently have the following visa;

H4 F2 Other _____

I will keep my current visa status

I will apply to the U.S. Citizenship and Immigration Services (USCIS) to change my visa status to F-1

I will leave the U.S. and return on an F-1 visa

Other (explain): _____

PART E – DEPENDENTS

List any dependents (spouse and/or minor children) who will accompany you on an F-2 (F-1 Dependent) Visa*:

Last Name	First Name	Date of Birth (mm/dd/yy)	Country of Birth	Country of Citizenship	Relationship to You
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*Proof of dependency (marriage certificate, birth certificate, other) and passport copies are required.

POLICIES & PROCEDURES

Equal Opportunity/Non-Discrimination Grievance Procedure

City University of Seattle subscribes to the principles and laws of individual states and the federal government, including applicable Executive Orders that pertain to civil rights, equal opportunity, and affirmative action.

City University of Seattle prohibits discrimination on the basis of race, gender, religion, age, national or ethnic origin, physical, mental or sensory disability, marital status, sexual orientation, and status as a veteran. The policy regulates the recruitment, employment, and retention of faculty and staff and the operation of all University programs, scholarships, loans, activities, and services.

City University of Seattle has created the following procedure to provide an effective and acceptable way to bring to the University's attention any equal opportunity/non-discrimination, disciplinary or conduct-related problems and complaints. The procedure helps identify and eliminate legitimate causes for dissatisfaction and enables students, faculty and staff to file a grievance without fear of retribution or prejudice. The procedure is separate from and applies to all issues other than grades.

Evidence of practices that are inconsistent with this policy should be reported to the Human Resources Office. If a situation warrants further administrative assistance, after using City University of Seattle's grievance procedure and appeals conciliation process, public resources are available through the U.S. Department of Education, the U.S Office of Civil Rights, and the Washington State Human Rights Commission.

The grievance filing procedures are as follows:

1. The aggrieved party contacts the Director of Human Resources or appropriate designee as soon as a problem is recognized.
2. The aggrieved party and the Director of Human Resources or appropriate designee meet where an appropriate form is provided for the aggrieved party.
3. Once the form is completed, the Director of Human Resources or appropriate designee conducts an investigation and prepares a report of findings.
4. The Director of Human Resources or appropriate designee reviews the findings with the aggrieved party's department head and the University's management team.
5. Within 10 days the outcome of these reviews will be shared with the aggrieved party.
6. In the event of any apparently irreconcilable conflict, a three-person board comprised of non-involved management, supervisory staff and a member of one's peer group will be appointed to review the grievance and attempt conciliation. The board's written recommendation,

of which the aggrieved party will receive a copy, will be prepared within 10 additional working days for review by the President of the University.

7. When the appropriate action has been determined, all parties involved will be informed of the decision in writing. Finally, a follow-up procedure will be developed to ensure the action that was agreed upon is carried out accordingly.

Documentation of all proceedings will be held in strictest confidence and maintained in a confidential file.

It is the responsibility of all City University of Seattle employees to refer a student grievance to the Director of Human Resources or appropriate designee for compliance with this procedure.

Substance Abuse Policy

The goal of City University of Seattle's substance abuse policy is to ensure that the University and all its locations are free of illegal drug use, alcohol abuse or illegal drug activity. All City University of Seattle employees, faculty, staff and students will be provided with a complete copy of this policy. From time to time, drug-related educational materials and programs will be offered to enhance your awareness of the facts about alcohol abuse, as well as illegal drugs and the consequences of their use. Materials and programs also will describe the alternatives available to you in the event that you are or may become involved with drugs and feel the need for professional assistance. The University's typical response to voluntary requests for assistance is summarized in the policy. The policy's legal basis is the Federal Drug-Free Workplace Act of 1988, and Drug-Free School and Communities Act-Higher Education, Drug-Free Schools and Campuses, August 16, 1990. These laws and this policy apply to all City University of Seattle employees, faculty, staff and students, full-time, part-time and on-call. City University of Seattle is required by strict mandate of the Department of Education to implement and enforce these regulations.

Disclosure of Campus Security Policy & Campus Crime Statistics Act

City University of Seattle is a private nonprofit institution of higher education. Its mission to provide educational opportunities world wide, primarily to segments of the population not being fully served. City University of Seattle is committed to the safety and security of its entire faculty, staff and students. In accordance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, the university is dedicated to the accurate and timely dissemination of all crime statistics and security related information to our constituents. The annual report containing campus and non-campus crime statistics and related information may be accessed at www.cityu.edu. Paper copies are available upon request by calling our Human Resource Department at 1.800.426.5596, extension 7613.

SPECIAL ACCOMMODATIONS

Do you require special accommodation for a disability? Yes No If yes, please contact the Disability Support Services at 800.426.5596 ext. 4754

I hereby certify that the information I have provided on this application is accurate and complete to the best of my knowledge. I acknowledge that the falsification of information on the application or other required documents will result in dismissal from the university. Furthermore, I certify that I will have the full amount reported on the financial declaration form available for my personal and academic expenses, and I will be able to pay for travel to my home country upon completion of my studies.

Optional: I hereby authorize City University of Seattle to release information about my application to: _____
(Name of agent/friend/family if applicable)

By signing this form I confirm that I have read and understand the above equal opportunity, drug, grievance, and campus security policy statements.

Student name (please print) _____

Student signature _____ Date _____

US Immigration regulations require applicants to personally sign the application form. Applications signed by third parties will be invalid.

How did you hear about us? Family/Friends Student Fair Hotcourses Internet Publication Other _____



CityUniversity

of Seattle

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CREDIT CARD AUTHORIZATION

Name of student: _____

Credit card type (circle one): Visa MasterCard American Express Discover

Name of credit card holder: _____

Credit card number: _____

Expiration date: _____

Authorized amount: _____

Address of credit card holder: (including postal code) _____

I herewith authorize City University of Seattle to charge my credit card as listed above.

Signature of credit card holder: _____

Date: _____

3 Digit security code: _____