

CASE WESTERN RESERVE UNIVERSITY
INTERNATIONAL EXCHANGE STUDENT APPLICATION
2009-2010 ACADEMIC YEAR

Part 1: Personal Information

Name _____
Last (Family) First (Given) Middle

ID/SS# ____-____-____ (if applicable) Date of Birth (Month/Day/Year) _____

Entrance Term: Fall _____ Spring _____ Summer _____
Year Year Year
Male ____ Female ____ Marital Status: Single ____ Married ____

Country of citizenship: _____ and Visa Type _____

Permanent Address (home):

Telephone _____ Fax _____

E-mail _____

Address during academic year:

Telephone _____ Fax _____

E-mail _____

Have you ever applied to or attended Case? Yes ____ No ____

Planned duration of study at Case: 1 semester ____ 2 semesters ____

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Part 2: Current Program

Home Institution _____

Academic major (field, specialty) _____

Academic Adviser:

Name _____ Email _____

Telephone _____ Fax _____

Current year of study:

____ First year ____ Second year ____ Third year ____ Fourth year ____ Graduate student

Expected date of completion of current program _____

Part 3: Planned Program of Study at Case

Please list specific courses you would like to enroll in. Courses offered at Case are listed at the following website: <http://www.cwru.edu/courses/catalog/>. Indicate which courses are absolutely necessary and those that are optional.

Subject	Course Title	Necessary/Optional
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

My signature below indicates that all information contained in my application is complete, factually correct, and honestly presented.

Applicant Signature _____ Date _____

Student Adviser _____ Date _____