

Office of Undergraduate Advising Support

Case Western Reserve University 10900 Euclid Ave. Cleveland, Ohio 44106-7028 Phone: 216.368.2928

Fax: 216.368.4718

Visiting International Student Application (NON-EXCHANGE)

Please complete this application either by typing or printing your answers. You must also submit hard copies of the following materials:

- 1. A one-page essay in English, stating the reasons why you wish to study at Case Western Reserve University.
- 2. A copy of an official transcript from your home university, with translation.
- 3. One faculty recommendation.
- 4. If appropriate, demonstration of your language ability (TOEFL scores, letter from foreign language instructor, etc.).
- 5. Certification of financial support in the form of a certified letter from your bank or sponsor showing the required funding. In order to issue an I-20 or DS-2019 form to authorize a visa, Case Western Reserve University requires that students planning to enroll through educational exchange programs established between their institution and Case Western Reserve University show proof that they will have adequate funds to cover their tuition and living expenses for the duration of enrollment. The letter must be in English and include a conversion to U.S. dollars.

Please note: You will be charged a matriculation fee which will cover orientation, meals and activities. It is required of all new students.

Deadlines: Fall Semester – April 1

Spring Semester – Oct.1 Summer Semester – March 1

Return completed applications to: Steven P. Scherger, PhD

Sr. Associate Dean

Office of Undergraduate Advising Support

Sears Building 340

Case Western Reserve University

10900 Euclid Ave.

Cleveland, Ohio 44106-7028 U.S.A.

Phone: 216.368.2928 Fax: 216.368.4718

Email: sps17@case.edu

Part 1: Personal Information (Please type or print clearly)

Name:						
Last (family)	F	First (given)			Middle Initial (if applicable)	
SSN:		ate of Birth (MM/DD/YYYY)	:		
Entrance Term:	Fall Year	Spring	Sumr	ner	-	
	Year	YE	ear	Year		
Gender: Mal	e Female	Marital	Status:	Single	Married	
Country of Citizenshi	ip:		Visa Tyլ	oe:	_	
Permanent Address	:					
Phone Number:			_			
r none Number.						
Address During Ac	ademic Year:					
			<u> </u>			
Phone Number:						
Email:						
Have you ever appl	ied to or attended C	WRU?	Yes	No		
Planned duration of	f study at CWRU:	Fall	Spring	Sı	ummer	
		(year)	_	(year)	(year)	

Part 2: Current Program			
Home Institution:			
Maior (field, specialty):			_
Academic Advisor:			
Email:		_	
Telephone:		Fax:	
Current Year of Study:			
First Year	Second Year	Third Year	Fourth Year
Expected Graduation Date	ə:		
Part 3: Planned Program	of Study at Case Wes	tern Reserve	
Please list specific courses i website: https://case.edu/reg necessary and those that are	gistrar/registration-classes/		•
Subject	Course	e Title	Necessary or Optional
My signature below indi complete, factually corre			plication is
Applicant Signature:		Da	ite:
Student Advisor Signature: _		Da	ite: