

# International Application for Admission



**Domestic Applicants:** If you are a U.S. citizen or permanent resident alien, **DO NOT** use this application.

BEFORE MAILING: Please be sure you have:

- (1) answered all questions completely
- (2) enclosed \$15 application/processing fee
- (3) attached required academic documents
- (4) signed and dated this application

1. **Semester of Entry**  Spring, January \_\_\_\_\_  Summer, June \_\_\_\_\_  Fall, August \_\_\_\_\_
2. **Student's Full Legal Name**  Mr.  Mrs.  Ms. \_\_\_\_\_  
Last First Middle
3. **International Address** \_\_\_\_\_  
Street City State Zip  
**Phone:** \_\_\_\_\_  
Country Code/Area Code Number
4. **U.S. Address** \_\_\_\_\_  
Street City State/Province Zip  
**Phone:** \_\_\_\_\_  
Country Code/Area Code Number
5. **U. S. Social Security Number** \_\_\_\_\_  
Leave blank if you do not have SSN Please assure accuracy of SSN
6. **Students Date of Birth** \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Month Day Year City State/Province Country
7. **Gender (optional)** Gender:  Male  Female
8. **Citizenship/Residency** Are you a United States Permanent Resident?  Yes  No If yes, see Domestic application information.  
Country of citizenship \_\_\_\_\_ Is English your native language?  Yes  No  
If no, what is your native language? \_\_\_\_\_  
Do you currently hold non-immigrant status?  Yes  No If yes, indicate type \_\_\_\_\_  
INS admissions number (from Form I-94) \_\_\_\_\_  
If you are not currently in the U.S., list visa type you plan to use when entering the U.S.  
 F-1  J-1  other  
Have you taken the Test of English as a Foreign Language (TOEFL)?  Yes  No  
TOEFL score  written \_\_\_\_\_  computerized \_\_\_\_\_
9. **Email Address** \_\_\_\_\_  
Please print clearly. If provided, your e-mail address will be used for correspondence prior to admission.
10. **Next of Kin/  
Emergency Contact**  Mr.  Ms. \_\_\_\_\_  
Last First Middle Relationship  
Street City State/Province Zip  
**Phone:** \_\_\_\_\_  
Area Code Number Country
11. **Previous Application** Have you previously applied to OSU-OKC?  Yes  No  
If yes, list semester of application: \_\_\_\_\_ OSU-OKC ID Number \_\_\_\_\_
12. **Application Fee**  I have enclosed the non-refundable \$15 applications/processing fee required of all applicants.  
*Make checks payable to OSU-OKC. DO NOT SEND CASH.*

PLEASE COMPLETE REVERSE SIDE

