

2015 APPLICATION FORM FOR INTERNATIONAL STUDENTS

Berkeley Summer Sessions | 1995 University Ave., Suite 130, Berkeley, CA 94704 | Fax: 510.664.9825 | E-mail: summer@berkeley.edu

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PERSONAL INFORMATION

* Required Field

Last Name* (Family Name/Surname)
as appears in passport

First Name* (Given Name)
as appears in passport

Middle Name
as appears in passport

Birthdate* (MM-DD-YYYY)

Sex* (Gender): ☐ Male ☐ Female

Street Address*

City* State/Province Zip/Postal Code* Country*

E-mail Address* Telephone Number* Fax/Alternate Number

May Campus Directory Services release your address to the public?* ☐ Yes ☐ No

May Campus Directory Services release your phone number to the public?* ☐ Yes ☐ No

TRANSCRIPT ADDRESS

* Required Field

You will be mailed an Official Transcript by the end of September 2015. If you do not provide a transcript address by August 14, 2015, one will be mailed to your permanent address.

Please indicate which address you want your transcript sent to*:

- ☐ Same address as the left (*do not provide an address below*)
☐ Send to a new address (*fill out a different address below*)
☐ Will add an address later (*do so by August 14, 2015*)

Name of the Recipient*

Street Address*

City* State/Province

Zip/Postal Code* Country*

COURSE SELECTION

* Required Field

	Department*	Course Number*	Course Control Number*	Session*	Grading Option*	Units*	Tuition*
Ex.	Statistics	100	12345	C	Letter	2	\$920
COURSE 1							
	Discussion Section						
	Laboratory Section						
COURSE 2							
	Discussion Section						
	Laboratory Section						
COURSE 3							
	Discussion Section						
	Laboratory Section						
COURSE 4							
	Discussion Section						
	Laboratory Section						

STUDENT INFORMATION

* Required Field

What is your current Visa Status?*

- ☐ U.S. Citizen ☐ Permanent Resident
☐ F-1 ☐ J-1 ☐ Other _____

If F-1 or J-1, will you return to your U.S. school? ☐ Yes ☐ No

Affiliate _____

Name of the school you currently attend*

What is your student status (as of Spring 2015)?*

- ☐ UCB Extension Student
☐ Attend a California Community College
☐ Attend other Two Year College
☐ Attend a California State University
☐ Attend other Four Year College or University
☐ Enrolling for Future Degree ☐ Enrolling for Job Advancement
☐ Enrolling for Personal Enrichment

Have you received the equivalent of a U.S. Baccalaureate (BA/BS) Degree?* ☐ Yes ☐ No

Will you receive a BA/BS this summer?* ☐ Yes ☐ No

Have you been admitted to UC Berkeley for a degree program beginning fall term?
☐ Yes ☐ No ☐ UCB has not informed me of the admission decision

Have you attended UC Berkeley before?* ☐ Yes ☐ No

PAYMENT INFORMATION

* Required Field

The Total of All Course Fees from above* \$ _____ + Enrollment Fee \$ 335.00 + Int'l Service Fee \$ 300.00 + Document Management Fee \$ 53.00 = YOUR TOTAL FEES DUE* \$ _____

I understand that Berkeley Summer Sessions is allowing me to register using this paper application due to circumstances that have prevented me from using the online application form. I agree to establish my CalNet ID and pay my fees in full via the MySummer student portal at <https://mysummer.berkeley.edu/mysummer/appStatus.php> immediately upon the receipt of my Application ID number. I understand that my transcript will be blocked, late fees will be assessed and the University may refer my account to a commercial collections agency should I fail to pay my fees.

Signature* _____ Date* _____

STUDENT SIGNATURE

* Required Field

I understand that the admission to Berkeley Summer Sessions is conditional on compliance with University policies, and may be revoked at the discretion of Summer Sessions in accordance with the Code of Student Conduct (uga.berkeley.edu/uga/conduct.stm). I also agree to the rules regarding fees, refunds, and enrollment changes published on the Summer Sessions website (summer.berkeley.edu), including, but not limited to, the \$100 NON-REFUNDABLE portion of the fees.

Signature* _____ Date* _____