

CALIFORNIA STATE UNIVERSITY, **LONG BEACH**AMERICAN LANGUAGE INSTITUTE APPLICATION FORM

THIS FORM MAY BE PRINTED OR COMPLETED ELECTRONICALLY

PROGRAMS

Intensive English Pro	ogram (IEP)	13 weeks – 16 weeks	
☐ Fall	☐ Sprir	ng Summer	
Intensive English Pro	ogram (IEP)	6 weeks	
☐ Spring Only			
Short Term: Languag	ge and Cultu	ure 3 weeks	
☐ Summer 1 (July)		Summer 2 (August)	
Short Term: Languag	ge and Cultu	ure 6 weeks	
☐ Summer 1 and 2	(July and A	rugust)	
Short Term: Languag	ge and Cultu	ure 2 weeks	
☐ Winter (Concurr	ent enrollm	nent in Spring IEP in January)	
Graduate Business F	Preparation	(GBP) program / MBA Preparation (MBAP) program 1	6 weeks
☐ Spring	☐ Fall		
Teaching English as	a Foreign La	anguage (TEFL) 6 weeks	
☐ Summer Only			



STUDENT INFORMATION

Name*:			
* Exactly as it appea	Given Name ars on your passport		Family Name
Date of Birth (M	M/DD/YYYY):	Gender:	
City of Birth, Co	untry of Birth:		
Phone Number:		Email Address:	
Home Country A	Address:		
•		Street Address	
City		Country	Postal Code (If Applicable)
Country of Citiz	enship:		
Will you require	a Sevis Form I-20 to ap	ply for an F-1 Student Visa? 🔲 Y	es 🔲 No
_	nest level of education yed dary / High School □S	ou have completed? Some College Bachelor's Degre	ee □Master's Degree
TRANSFER STU	DENTS:		
Complete this se	ection only if you are trai	nsferring to this program from anot	ther U.S. school.
School Name: _			
School Phone N	umber:	Dates Attended:	
What are your t	ransfer plans?		
_	taying in the U.S. before	coming to CSULB	
☐ I will be o	outside of the U.S. before	e coming to CSULB	
U.S. Address:			
		Street Address	
City	State	Country	Postal Code
Phone Number:			



EDUCATIONAL GOALS

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DEPENDENTS

Complete this section if your dependent is joining you

Dependent Name*:		
Given Name * Exactly as it appears on their passport		Family Name
Date of Birth (MM/DD/YYYY):	Gender:	
Relationship:	Country of Citizenship:	
City of Birth, Country of Birth:		
Dependent Name*:		
Given Name * Exactly as it appears on their passport		Family Name
Date of Birth (MM/DD/YYYY):	Gender:	
Relationship:	Country of Citizenship:	
City of birth, Country of Birth:		
Dependent Name*:		
Given Name * Exactly as it appears on their passport		Family Name
Date of Birth (MM/DD/YYYY):	Gender:	
Relationship:	Country of Citizenship:	



APPLICATION FEE AND SIGNATURE

I verify that the information provided on this application is accurate. I also confirm that the mailing address provided on this application is where the applicant is physically living and understand that by law, the DSO cannot ship the SEVIS form I-20 (if applicable) to a third party.

Signature:	Date:
Parent / Legal Guardian Signature*:	Date:
* If you are below the age of 18	
"Form I-20 Issuance and School Use Recruiters (8 C must issue the Form I-20 "Certificate of Eligibility fo	sitor Program (SEVP) released a policy guidance update to FR 241.3 (k))" which states that designated school officials or Non-immigrant Students" directly to the student, parent by law, the DSO at the ALI will not be issuing the SEVIS Form
There is a non-refundable \$175 application fee.	
\square I agree to be billed for the non-refundabl	e \$175 application fee
You will receive payment information via email sen	t to the email address you provided on this application.
Or you can pay the application fee using this link.	



APPLICATION CONSENT FOR RELEASE OF INFORMATION

Complete this section if you are coming through an agency

I understand that as an applicant to the American Language Institute (ALI) at California State University, Long Beach (CSULB), the federal Family Educational Rights and Privacy Act of 1972 (FERPA) protects the privacy of my education records. As a prospective student, I also may have rights under the laws of the United States, the State of California and/or my country of residence protecting the privacy of records I give to the ALI at CSULB and/or third parties in connection with my application to enroll as an ALI student at CSULB. By signing this form, I, hereby waive any rights described above and give my consent to the ALI at CSULB and the third party listed in Section 3, to disclose my application and any other education records to each other for the purpose of discussing application details, admission status, and educational/academic records at the ALI at CSULB.

As of January 7, 2020, the Student and Exchange Visitor Program (SEVP) released a policy guidance update to "Form I-20 Issuance and School Use Recruiters (8 CFR 241.3 (k))" which states that designated school officials (DSO) must issue the Form I-20 "Certificate of Eligibility for Non-Immigrant Students" directly to the student, parent or legal guardian of underage applicants. Therefore, by law, the DSO at the ALI will not be issuing the SEVIS Form I-20 (if applicable) to any third party. In addition, the applicant has the option to provide consent for the ALI to release the SEVIS ID number and the package tracking information to the third party in Section 3 by checking off the box in Section 1. Policy guidance applies to F-1 visa applicants only.

Student Name:		
Given Name		Family Name
Signature	Date (MM/DD/YYY)	Y):
* If you are under the age of 18, complete		
this document on their behalf.	of the Prospective Student under 18 years	
Signature	Date (MM/DD/YYYY): _	
	<u>:</u> Name:	
Phone Number:		
Address:	Street Address	
City	Country	Postal Code (If Applicable



SUPPLEMENTAL QUESTIONS FOR MBAP APPLICANTS ONLY

Complete this section only if you are applying for the Graduate Business Preparation (GBP) program / MBA Preparation (MBAP) program.

For each separate question below, write no more than 150 words to tell the MBA Preparation Program more about your personal background and business knowledge.

/ho is the pe	rson who has influenced you the most? How has he	e / she influenced you?



How has social media affected the business in your co	ountry?
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