



Office of International Student and Scholar Services
 Center for International Studies
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 St. Louis, MO 63121
 USA
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**J-1 VISITING INTERNATIONAL STUDENT APPLICATION FORM
 Form B - To be completed by invited international student**

NAME EXACTLY AS WRITTEN IN PASSPORT _____
 _____ (Family/Last name) _____ (Given/First name)
 MALE ___ FEMALE ___ DATE OF BIRTH (mm/dd/yyyy) _____

CITY AND COUNTRY OF BIRTH _____

COUNTRY OF CITIZENSHIP _____ PERMANENT RESIDENCE _____

HOME INSTITUTION _____
 Degree program: Doctoral (PhD) Master's Bachelor's/Undergraduate

MAJOR/FIELD OF STUDY _____

BRIEF DESCRIPTION OF THE SPECIFIC ACTIVITY IN WHICH YOU WILL BE ENGAGED AT UMSL:

Will this activity meet degree requirements at your home university? ___ yes ___ no

EMAIL ADDRESS: _____

RESIDENTIAL/MAILING ADDRESS IN HOME COUNTRY:

SOURCE OF FINANCIAL SUPPORT	AMOUNT
___ a. UM St. Louis	\$ _____
___ b. Home University _____	\$ _____
___ c. U.S. government agency: _____ Attach written confirmation	\$ _____
___ d. The student's government, paying the student directly Attach written confirmation from sponsor	\$ _____
___ e. All other organizations: _____ Attach written confirmation from sponsor	\$ _____
___ f. Student's personal/family funds. Attach bank statement or other financial document	\$ _____

DEPENDENTS (SPOUSE OR CHILDREN UNDER 21) WHO WILL ACCOMPANY YOU TO THE US

Name _____ Spouse ___ Son ___ Daughter Date of Birth (m/d/y) _____
 City and Country of Birth _____ Country of Citizenship _____

Name _____ Spouse ___ Son ___ Daughter Date of Birth (m/d/y) _____
 City and Country of Birth _____ Country of Citizenship _____