



PERSONAL DATA

Please type (or print clearly).

Name Last (Family) First Middle Other Last Names Used

Former last name(s), if any, under which we may be receiving transcripts, scores, etc.

Previous UTA ID number (If you have one)

Gender (optional) Male Female

Permanent Address Street Apt. No.

City State Zip/Postal Code Country

Current Mailing Address Street Apt. No.

City State Zip/Postal Code Country

List phone number(s) where you can be contacted concerning this application.

(cell/mobile) (home/other)

E-Mail Address

Birthplace City State Country

Birthdate Month Date Year

Country of Citizenship If you hold dual-citizenship, please list both countries.

Are you a U.S Permanent Resident (Permanent Resident Visa)? Yes No Pending If yes, please submit documentation of ability to reside permanently in the United States (ie US passport, green card, etc...).

Do you currently hold non-immigrant visa status? Yes No If yes, indicate type. Submit a copy of passport showing visa type (I-94 card, front and back) and appropriate USCIS documents (I-20, DS-2019, etc).

If you hold a visa other than F1, do you intend to apply for a change of status to F1? Yes No

If not currently in the U.S. list type of visa to be used when entering the U.S F1 Other (state type)



Emergency Contact (must be close relative/family member)

Last Name (Family/Surname)		First Name (Given name)		Relationship
Address _____				
Street	City	Country	Zip/Postal Code	
Phone Number _____			Email _____	

**EDUCATION PLANS**

Expected year of exchange: 20\_\_\_\_

Expected term(s) of exchange:  Fall Only (Aug. to Dec.)  Spring Only (Jan. to May)  Summer Only (June to Aug.)

Academic Year (Aug. to May)  Calendar Year (Jan. to Dec.)

To which college of the University are you applying? All new students will be considered pre-majors until accepted into an academic major and will be advised by their respective academic component. Undeclared majors will be advised by the University College.

- Architecture/Planning & Public Affairs
- Business
- Engineering
- Liberal Arts
- Science
- Nursing & Health Innovation
- Social Work
- Education
- Undeclared

Which major do you plan to pursue? \_\_\_\_\_

Do you already hold a bachelor's degree? Yes  No   
If yes, please provide documentation, such as a transcript or copy of diploma.

**YOUR COLLEGIATE EDUCATIONAL DATA**

List the name and location of the college/university you are now attending.

Name of Institution	Country	Dates of Attendance	Expected Date of Graduation
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List all colleges, universities or vocational/technical schools you have attended. Please provide any transcripts or certificates earned from each school.

Name of Institution	Location (city/state/country)	Mo/Yr Enrollment	Semester/Quarter Units Completed	Graduation Type Certificate
_____	_____	___/___ to ___/___	___/___	_____
_____	_____	___/___ to ___/___	___/___	_____
_____	_____	___/___ to ___/___	___/___	_____
_____	_____	___/___ to ___/___	___/___	_____



**DISCIPLINARY/CONDUCT RECORD**

Have you ever been placed on non-academic probation or been dismissed or suspended from another college or university for non-academic reasons, or is a disciplinary complaint currently pending against you at another college, which might result in discipline if you are found guilty? Yes  No   
(If yes, attach a separate letter of explanation.)

**ENGLISH LANGUAGE PROFICIENCY**

Is English your first language? Yes  No

If you answered no, please respond to the following questions.

- a. How many years have you been learning English? \_\_\_\_\_
- b. Are your current university classes taught in English? Yes  No
- c. What qualifications in English Language do you have? TOEFL  Score: \_\_\_\_\_  
IELTS  Score: \_\_\_\_\_  
Other?  \_\_\_\_\_

**DESIGNATED REPRESENTATIVE**

The Family Educational Rights and Privacy Act of 1974 prohibits a university from releasing information to anyone other than the student. If you wish to have someone discuss your file with this office, please list his or her name and address on this line. Should a representative complete any part of the application with inaccurate or incomplete information, the applicant will be held responsible.

\_\_\_\_\_  
(Name) (Address) (Phone Number)

Signature \_\_\_\_\_ Date \_\_\_\_\_

**OATH**

I understand that information submitted herein will be relied upon by college/university officials to determine my status for admission and residency eligibility. I authorize the college/university to verify the information I have provided. I agree to notify the proper officials of the institution of any changes in the information provided. I certify that the information on this application is complete and correct and understand that the submission of false information is grounds for rejection of my application, withdrawal of any offer of acceptance, cancellation of enrollment, or appropriate disciplinary action. I agree to pay my account when billed. I understand that if I fail to pay any debt when due, I will be assessed late charges. I further agree to pay all attorney's fees and other reasonable collection costs necessary to collect amounts not paid when due. I understand that it is my responsibility to keep the Registrar's Office informed of my current address at all times.

Signature \_\_\_\_\_ Date \_\_\_\_\_



**DEPENDENT INFORMATION**

Please complete the information below if you are married and your spouse and/or children will accompany you.

Spouse Name \_\_\_\_\_  
Last (Family) First Middle Maiden (if applicable)

Child Name \_\_\_\_\_  
Last (Family) First Middle Maiden (if applicable)

Additional information may also be required. Please note: If you are married and your spouse and/or children will accompany you, you will need to prove a higher level of financial resources per person accompanying with you. Contact the UT Arlington Study Abroad Office for more information.

**FINANCIAL STATEMENT FOR EXCHANGE STUDENTS**

All prospective exchange students who study at UTA must complete this form. USCIS regulations require proof that sufficient financial resources are available to meet prospective educational and living expenses while in the United States. Therefore, applicants must show financial documentation demonstrating the availability of the minimum required amount of funds (see below), depending on the length of study at UTA. A Certificate of Eligibility (Form I-20) will not be issued until this information is provided.

- \$6,645.00 USD (One Semester: August to December OR January to May)
- \$13,290.00 .00 USD (Academic Year: August to May)
- \$15,949.00 USD (Calendar Year: January to December)



STATEMENT OF RESOURCES

Please indicate below the source and amount of financial support. If you have more than one source, check as many categories (A,B,C, or D) as appropriate and list amounts. Documents and certificates that verify each source should accompany this form with amounts converted to U.S. currency equivalents. All documents must be dated no earlier than three months prior to the receipt of your application by UT Arlington. Photocopies are acceptable. Since you may need original records to present to immigration officials, it is recommended you request two copies when preparing your supporting financial documentation.

A. If you are supporting your studies through your own savings: (1) sign the Statement of Resources; and (2) your bank must complete the Bank Statement or prepare a separate bank letter. Name of Bank \_\_\_\_\_ \$\_\_\_\_\_

B. If you will be supported by another person or family member: (1) sign the Statement of Resources; (2) the person providing support must sign the Sponsor Statement; and (3) the sponsor's Bank must complete the Bank Statement or prepare a separate bank letter. Name of Sponsor \_\_\_\_\_ \$\_\_\_\_\_ Name of Bank \_\_\_\_\_

C. If you will be sponsored by your government or any other organization: (1) sign the Statement of Resources; and (2) the sponsor must prepare a letter of financial support to Accompany this form. Name of Organization \_\_\_\_\_ \$\_\_\_\_\_

D. If you will be supported by a scholarship or educational loan: (1) sign the Statement of Resources; and (2) a letter verifying the amount of scholarship award/educational loan must Accompany this form. Name of Awarding Agency \_\_\_\_\_ \$\_\_\_\_\_

Total U.S. \$\_\_\_\_\_

I certify that the information provided on this form is true and correct. I further certify: (1) I will have sufficient funds to meet the required minimum amount of \_\_\_\_\_ in U.S. currency to cover the expenses, excluding travel, for my studies at The University of Texas at Arlington; (2) I will have adequate funds to travel to and from the U.S.; and (3) I can make the necessary arrangements to have all funds transferred to the U.S.

I understand: (1) I will need approximately \$1,500.00 in U.S. currency to meet initial housing rental and related expenses, (2) I must attend a New International Student Orientation Program before registering for classes and; (3) I will be required to purchase or show adequate proof of health insurance while residing in the U.S.

Signature \_\_\_\_\_

Date \_\_\_\_\_



**SPONSOR STATEMENT**

Unless you are supported by your own savings, immigration documents cannot be issued without the sponsor's signature. A separate letter from your sponsor and the U.S. government Form 1-134 (Affidavit of Support) are acceptable substitutes.

I certify that I will make available to \_\_\_\_\_ a minimum of \_\_\_\_\_ USD  
(Name of Student)  
to cover expenses related to his/her studies at the University of Texas at Arlington.

\_\_\_\_\_  
(Signature of Sponsor)  
Sponsor's Name (please print) \_\_\_\_\_

Address \_\_\_\_\_

Relationship of sponsor to student \_\_\_\_\_

**BANK STATEMENT**

This is to certify that \_\_\_\_\_, the sponsor whose signature appears above, has funds adequate to meet the required amount (see below) in expenses for the applicant named above.

**Please check one**

- \$6,645.00 USD (One Semester)
- \$13,290.00 USD (Academic Year: August to May)
- \$15,949.00 USD (Calendar Year: January to December)

This certificate does not constitute a statement of liability on my part or on behalf of the bank I represent.

(Seal or Stamp of Bank)	Signature	_____
	Bank Name	_____
	Bank Address	_____
	Date	_____

If bank policies do not allow completion of this form, a separate bank letter or affidavit is an acceptable substitute. The letter should be on bank letterhead, signed by a bank officer, and specifically state the following:

1. Name of account holder;
2. Date account was opened; and
3. Current account balance or specific acknowledgement that account holds a minimum of \$6,645.00 USD for one semester, OR \$13,290.00 USD for one academic year, OR \$15,949.00 USD for one calendar year.



**CHECKLIST OF DOCUMENTS TO SUPPORT YOUR APPLICATION**

- Scanned copy of your official transcript
- Scanned copy of your TOEFL/IELTS certificate (if applicable)
- Scanned copy of the photo I.D. page of your passport
- Required financial documentation

The **Completed Application** along with the above mentioned documents must be emailed **by the home university coordinator** (application materials emailed directly from the student will not be accepted) to [studyabroad@uta.edu](mailto:studyabroad@uta.edu) or sent by mail to The University of Texas at Arlington | Office of International Education | Box 19028, 1022 UTA Blvd | Arlington, TX 76019-0028.

Early application is advised. The deadline to apply for Fall/Academic Year is **April 1**. The deadline to apply for Spring is **November 1**.



## CONSENT FOR THE COLLECTION AND PROCESSING OF SENSITIVE PERSONAL DATA FROM THE EUROPEAN UNION

- A. Pursuant to the European Union General Data Protection Regulation (“GDPR”) The University of Texas at Arlington (“UTA”), in its capacity as a data controller under the GDPR, must obtain your explicit, affirmative consent before it can collect or process any sensitive personal data for a lawful basis, including, but not limited to, employment, admission and enrollment, study abroad, internship abroad, online education, etc. For information on how UTA uses data, please review the Legal & Privacy Notice <https://www.uta.edu/legalaffairs/notices/legal-and-privacy-notice.php>.
- B. Sensitive personal data includes racial or ethnic origin; political opinions; religious or philosophical beliefs; trade union membership; genetic, biometric data; health data; or data concerning a person’s sex life or sexual orientation.
- C. Any sensitive personal data that is collected from you will be for the sole purpose of
- Application for admission to UTA;
- and is necessary for that purpose. This may include processing the sensitive personal data as required to execute contractual obligations in connection with the previously described purpose and compliance with applicable laws, to execute the obligations to you concerning your
- Enrollment as a student at UTA.
- Sensitive personal data regarding a legal process which may have been provided to UTA by public authorities will be processed only for the purposes relating to a health or safety emergency and complying with any applicable law.
- D. Sensitive personal data will be handled and processed only by the persons who are responsible for the necessary activities for the purpose above, and will be transmitted from the EU to the UTA campus.
- E. Refusal of consent may make it impossible for UTA to carry out its necessary activities for the purpose above, and may preclude UTA’s ability to provide requested educational services to you.
- F. You have the right to withdraw your consent to the collection and processing of sensitive personal data. If you would like to withdraw consent, for students please contact the University’s Registrar, Nichole Mancone Fisher, at [nichole.manconefisher@uta.edu](mailto:nichole.manconefisher@uta.edu).
- G. UTA is committed to ensuring the security of your information. We have put in place reasonable physical, technical, and administrative safeguards designed to prevent unauthorized access to your information.
- H. UTA has a GDPR Privacy Notice which includes your individual rights concerning your data. Please see the UTA Legal and Privacy Notice for more information.



Having read this notice, \_\_\_\_\_, the undersigned, hereby  
[Print full name here]

Give consent

Do not give consent

for the use of my sensitive personal data, and the transfer of sensitive personal data overseas, for the purpose outlined in this notice.

Date \_\_\_\_\_  
Month/Day/Year

Signature \_\_\_\_\_

Signature may be in handwritten or digital form.

If you have questions about this Consent, please contact:

Director of Study Abroad at [studyabroad@uta.edu](mailto:studyabroad@uta.edu).