

Mandatory Information Required by International Applicants

Today's Date: _____

Applicant's Name (as it appears on your passport): _____
(Given/First Name) (Family/Last Name)

U.S. Social Security Number (if available): _____

Applicant's Country of Citizenship: _____ **Applicant's Country of Birth:** _____

Applicant Date of Birth: _____ **Applicant's Gender:** Male _____ Female _____
Month/Day/Year

Applicant's Marital Status: _____
Married/ Single

What is the **applicant's** current status? *F1* _____ *J1* _____ *B1/B2* _____ *U.S. Citizen* _____

Permanent Resident (Green Card) _____ *No Status (No Visa)* _____ *Other (Please Specify)* _____

The **applicant's** home/permanent address outside of the U.S. _____
Street address

City, State/Province, Postal Code, Country

Mailing address to which the applicant would like correspondence sent (including I20 & admission letter, etc):

Street address

City, State/Province, Postal Code, Country

Is the **applicant** currently living at: [*The above mailing address* ↑] OR [*Home country*]? (Please circle)

Applicant's current Telephone Number: _____
Country code/city code/number

Applicant's current E-mail Address (es): _____
(Please write legibly)

Will the **applicant** bring any dependents (e.g. spouse, children) with him/her during studies in the U.S.? ___ Yes ___ No

If yes, please list their names, relationship to the **applicant**, place of citizenship, place of birth, and date of birth (DOB) below:

| | | | | |
|------|--------------|-------------|----------------|-----|
| Name | Relationship | Citizenship | Place of Birth | DOB |
| | | | | |
| Name | Relationship | Citizenship | Place of Birth | DOB |
| | | | | |
| Name | Relationship | Citizenship | Place of Birth | DOB |
| | | | | |

Office of International Programs, 601 Duquesne Union, Pittsburgh, PA 15282

Phone: +1 412 396 6113 *Fax:* +1 412 396 5178

Email: intladmissions@duq.edu *Website:* www.duq.edu/international-admissions