

California State Polytechnic University, Pomona • 3801 West Temple Avenue, Pomona, CA Global Education Institute, 91768 909.979.6619 • fax 909.869.5077 • www.cpp.edu/~ceu/gei/

Cal Poly Pomona College of the Extended University

APPLICATION

4+1+1-Year Master in Civil Er		Frogram Term: Fall 2017
Student Information: (Please co	omplete form in English)	
1. Name: LAST NAME/FAMILY NAME	FIRST NAME/GIVEN NAME	MIDDLE NAME
2a. Permanent Home Country Address:	2b. Teleph	one:
STREET: CITY: DROWN-CE/CTATE:	2c. Studen	t's Email:
PROVINCE/STATE: COUNTRY: POSTAL CODE:		
3a. Mailing Address:	3b. Second	dary Telephone:
STREET: CITY:	3c. Second	dary Email:
PROVINCE/STATE: COUNTRY: POSTAL CODE:	3d. WeCha	at:
4. Sex: Male Female 5. Birth Date	e: MONTH / DAY / YEAR 6. Country	of Birth:
7. Country of Citizenship:	8. Native La	anguage:
9a. The name of college or university you are current	tly attending:	
9b. Your major:		

Financial Statement: Complete this section if you are requesting Form I-20 for the student visa.

The United States Immigration and Customs Enforcement (ICE) requires that all applicants be able to pay tuition charges and living expenses while studying in the United States. During your study at Cal Poly Pomona, you will not be permitted to work. Therefore, you must show that you have funds available to study before you come to the United States.

If the applicant will be provided funds by guarantor:

This is to certify that I guarantee all school, living, and personal expenses for the applicant named above during his/her entire period
of study at Cal Poly Pomona. I have attached an original or certified copy of a bank statement, signed by a bank official, which shows
the amount of funds available for study.
Complete Name of Guarantor:
Relationship of Guarantor to Student: Sponsor
Guarantor's signature: Date:
Signature:
I verify that the information contained in this application is accurate to the best of my knowledge. I attest to having at least 2 years of high
school level English Language instruction.
PRINT/TYPE THE NAME OF STUDENT (IN ENGLISH) DATE
SIGNATURE OF STUDENT (IN ENGLISH)

REQUIRED Application Documents:		
Signed & Completed Application		
Copy of Passport		
Official Transcripts		
Financial Support Document		
Copy of Bachelor's Degree Certificate (4+1+1 Only)		



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STUDENT CONSENT FOR RELEASE OF INFORMATION

I understand that if I am admitted and enroll in the 3+1+Master or 4+1+Master Program at Cal Poly Pomona (CPP), 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 CPP and/or third parties in connection with my application to enroll as a CPP student. By signing this form, I,______, hereby waive any rights described above and give my consent to CPP and the person / agency named below to disclose my application and any other education records to each other for the purpose of discussing my application to, admission status and educational experience at CPP: Name of Person: Name of Agency: Phone Number: Email Address: I understand that I have the right not to consent to the release of information in my student records and that I may revoke this consent at any time by giving written notice to CPP and the person / agency named above. This consent remains valid unless and until I revoke it. Prospective Student Signature: Prospective Student Name (print): ______ Date: _____ If Prospective Student is under 18 years of age: I am the parent or legal guardian of the Prospective Student. I am signing this document on his or her behalf. Parent or Guardian Signature: Parent or Guardian Name (print): ______ Date: _____