INTERNATIONAL STUDENT APPLICATION
For Admission to Undergraduate Degree Programs

STUDENT INFORMATION (Please type or print in ink)
When do you intend to begin your study at the University of Hartford:
☐ Fall (Late August)  ☐ Spring (January)  ☐ Year 20_____

Will you be entering the University as:
☐ Freshman (First Year)  ☐ Transfer (Previous University Study)

Do you plan to live:
☐ In University housing  ☐ Off campus in an apartment/home

PERSONAL DATA
If you have a U.S. Social Security number, list here: _________ - _________ - _________

Full Name ____________________________
(As it appears on your passport)   Last (Family)   First (Given)   Middle

Sex: ☐ Male  ☐ Female

List other names that may appear on your credentials

Current mailing address:
Valid until □□□/□□□/□□□
Month  Day  Year

House Number and Street
City  State

Country  Mail Code

Telephone  Country Code  City Code  Number
Fax  Country Code  City Code  Number

E-mail ________________________________

Permanent home address:

House Number and Street
City  State

Country  Mail Code

Telephone  Country Code  City Code  Number
Fax  Country Code  City Code  Number

Date of Birth □□□/□□□/□□□
Month  Day  Year

What is your native language? ________________________________

EDUCATIONAL PLANS AND OBJECTIVES
Please indicate with a 1 or 2 your first and second choices of the Colleges or Schools where you plan to earn your degree:

1. College of Arts and Sciences  2. College of Education, Nursing and Health Professions  3. Hartford Art School

List the major you plan to pursue, if known:

For Office Use Only:

□□□□ COLLEGE □□□□ MAJOR □□□□ DEGREE □□□□ DEPT.
FAMILY INFORMATION

Father's Name:

Last ___________________________ First ___________________________ Middle ___________________________

Title ____________________________________________________________

Company/Organization ____________________________________________

Work Phone (______ ) _____________________________________________

Work Fax (______ ) ________________________________________________

E-mail Address ____________________________________________________

Person to be notified in case of an emergency:

In the United States ______________________________________________

In your home country ______________________________________________

Telephone ___________________________ Fax ____________________________

E-mail Address ____________________________________________________

Who will be paying your fees during your enrollment at the University? __________

TEST INFORMATION

Results of the Test of English as a Foreign Language (TOEFL) are required of all candidates, new or transfer, whose native language is not English. Indicate date on which you have taken or plan to take the test __________. Total Score (if known) __________.

The Scholastic Assessment Test (SAT) or the American College Test (ACT) is not required of international students. However, international students are advised to take the SAT or ACT if possible, for either may establish admissibility for an applicant when his/her foreign records alone do not. If you have taken either of these tests, please have your official scores sent to our office.

Test Date ____________ SAT: Math _________ / Verbal _________

ACADEMIC HISTORY

Educational Institutions Attended

Please list below all high schools (secondary), colleges and universities attended. Failure to do so may result in loss of credit or dismissal.

<table>
<thead>
<tr>
<th>Name of Institutions</th>
<th>City/Country</th>
<th>Dates of Attendance From – To</th>
<th>Language of Instruction</th>
<th>Diplomas Certificates</th>
<th>Year of Graduation</th>
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TRANSFER APPLICANTS

List all other universities previously attended or currently attending. Please include any study at the University of Hartford. To ensure transfer credit, all final official transcripts must be accompanied by course descriptions/course syllabi. This information must be presented in English.

<table>
<thead>
<tr>
<th>University</th>
<th>Date of Attendance</th>
<th>Number of Subjects Completed</th>
<th>Grade Point Average to Date</th>
<th>Language of Instruction</th>
<th>City/Country</th>
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Please list subjects you are currently studying: (transfer applicants only)

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<tr>
<th>Subject Title</th>
<th>Subject Number</th>
<th>Hours Per Week Lecture</th>
<th>Hours Per Week Laboratory</th>
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VISA INFORMATION

If you are accepted, what type of visa would you hold at the University? _______________________________________________________

If you are already in the United States:

(a) On what date did you enter the U.S.? ____________________

(b) Please check the type of visa you now hold:  □ Student (F)  □ Exchange Visitor (J)  □ Government Official

Other (specify) _______________________________________________________

Note: If you are a U.S. permanent resident, please complete the U.S. application and submit a certified copy of your Green Card ID.
APPLICATION FEE AND SIGNATURE

Enclosed is my check or money order (DO NOT SEND CASH) for U.S. $35 payable to the University of Hartford. I understand that this application fee is non-refundable and must be in U.S. currency.

I certify that all information provided on this application is complete, factually accurate, and honestly presented. I further understand that my admission and subsequent registration may be cancelled if any information is found to be false or intentionally omitted. If I enroll at the University of Hartford, I agree to familiarize myself with all rules and regulations of the University and abide by them.

Student Applicant’s Signature_________________________________________ Date __________________________

How did you hear about the University of Hartford?

☐ Counselor/Teacher

Name______________________________________________________________

Given Name_______________________________________________________

Family Name_______________________________________________________

Telephone__________________________ Fax___________________________

E-mail_____________________________

☐ Currently enrolled family member/friend

Name______________________________________________________________

Given Name_______________________________________________________

Family Name_______________________________________________________

Telephone__________________________

☐ Former Student/Alumnus of the University

Name______________________________________________________________

Given Name_______________________________________________________

Family Name_______________________________________________________

Telephone__________________________

☐ University Fair: Location Date ________________________________

☐ Internet

☐ USIS, Fulbright or Amideast Office

☐ Other (please specify)____________________________________________

Thank you for completing your application for admission. To confirm receipt of your application, please call 1-860-768-4961, fax a message to 1-860-768-4961, or request confirmation via E-mail by sending a message to the following address: skinner@hartford.edu.