

BACKGROUND INFORMATION FORM

PLEASE TYPE OR PRINT IN INK: This form will be used to assist in processing your application and preparing immigration documents

Semester:

Fall (September) 20____ Spring (January) 20____ Summer (May) 20____

*Duration of Program (Exchange Students): 1 Semester Academic Year

Applying As: (UG = Undergraduate)

ESL Institute Only Exchange Student UG Freshman UG Transfer Graduate

FULL NAME AS PRINTED IN YOUR PASSPORT:

Last/Family/Surname First/Given Middle

Permanent Address in Home Country

Mailing Address (If Different)

E-mail: _____

Current Telephone Number: _____

Country of Citizenship: _____

City & Country of Birth: _____

Date of Birth: _____
 Month / Day / Year

Male Female

Native Language: _____ TOEFL/IELTS Score: _____ Exam Date: _____

Education History (Please list all institutions/schools/universities attended):

Name of Institution	Country	Dates Attended	Language	Degree/Certificate Awarded

How did you hear about UW-La Crosse? (Check all that apply)

- Education Fair-Name: Educational Agency-Name:
 Embassy-Name: Internet
 Friend or Relative Other-Explain:

Please complete and return this form to the Office of International Education, University of Wisconsin-La Crosse