



1. Agent Details

I hereby nominate the below Agent to submit this application to San Francisco State University (SFSU) on my behalf including all necessary documents, and to act as my representative for all future correspondence.

Name of Agent	GOstralia!-GOzealand!
Office	<input type="checkbox"/> Stuttgart <input type="checkbox"/> Koeln <input type="checkbox"/> Berlin/Hamburg <input type="checkbox"/> Dortmund

2. Hinweis zur Bewerbung:

Bitte fülle dieses Formular aus und schicke es mit den Bewerbungsunterlagen per Post an uns zurück. Wir nominieren dich dann für das Auslandsemester an der SFSU. Die SFSU schickt dir einen Link zum Bewerbungsportal über den du die Bewerbung online selbst fertigstellen kannst. Bitte trage alle Daten vollständig ein. Wir schicken die beglaubigten Dokumente derweil direkt per E-Mail an die SFSU.

3. Applicant Details

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Mx
Family name	
Given name	
Middle name(s)	
E-mail address	
Date of birth	____/____/____ (dd/mm/yyyy)
Gender	<input type="checkbox"/> male <input type="checkbox"/> female <input type="checkbox"/> _____
Citizenship	
City of birth	
Country of birth	

4. Study Abroad Program Information

Proposed start date	<input type="checkbox"/> Fall <input type="checkbox"/> Spring Year: 20____
Proposed duration	<input type="checkbox"/> 1 Semester <input type="checkbox"/> 2 Semesters
Proposed study level	<input type="checkbox"/> Undergraduate/Bachelor <input type="checkbox"/> Postgraduate/Master
How many credits would you like to take?	<input type="checkbox"/> 12 CP <input type="checkbox"/> 15 CP (Undergraduate/Bachelor) <input type="checkbox"/> 9 CP <input type="checkbox"/> 12 CP (Postgraduate/Master)

5. Certificate (optional)

Are you interested in a Certificate?	<input type="checkbox"/> No <input type="checkbox"/> Yes, please choose from below:
Certificate name	
<input type="checkbox"/> International Business Certificate	
<input type="checkbox"/> Hospitality Tourism Management Certificate	
<input type="checkbox"/> Business Administration Certificate	
<input type="checkbox"/> Liberal & Creative Arts Certificate	

6. English Language Qualification

All applicants are required to provide evidence of their proficiency in the English language.

Have you sat/will you sit an English language test?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Test: _____
Test date	____/____/____ (dd/mm/yyyy)
Test score (if available)	
Have you completed two University courses in English?	<input type="checkbox"/> No <input type="checkbox"/> Yes (please attach proof from your University)

7. Financial Support

Submit a bank statement, sponsor's bank statement, government financial guarantee or scholarship letter. The minimum balance must cover tuition and living expenses (see Affidavit Form). Financial documents must be less than 3 months old.

Source of Funds	<input type="checkbox"/> Self <input type="checkbox"/> Family <input type="checkbox"/> Other:
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8. Declaration and Signature

I have attached a bank statement, sponsor's bank statement, government financial guarantee or scholarship letter.

I certify that all the information I am providing in the application is true to the best of my knowledge. I verify all is true and correct.

I understand that if I am admitted and enroll at San Francisco State University (SF State) 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 SF State and/or third parties in connection with my application to enroll as a SF State student. By signing this form, I hereby **waive** any rights described above and **give my consent** to SF State and the person / the Agency GOstralia!-GOzealand! 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 SF State.

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 SF State and the person / the Agency named above. This consent remains valid unless and until I revoke it.

Signature _____ **Date** _____ (dd/mm/yyyy)

EXHIBIT A

STUDENT CONSENT FOR RELEASE OF INFORMATION

I understand that if I am admitted and enroll at San Francisco State University (SF State) 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 SF State and/or third parties in connection with my application to enroll as a SF State student.

By signing this form, I, _____,
(Please Type/Clearly Print Name of Student)

hereby **waive** any rights described above and **give my consent** to SF State and the person / the 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 SF State:

Name of the Agency: _____ GOstralia!-GOzealand!
Name of the Agent Advisor/Counselor: _____
Agency Address: _____
Agency Phone Number: _____
Email Address: _____

I Am Applying To: _____ ALI _____ Undergraduate _____ Graduate _____ Other (_____)

Cal State Apply Confirmation Number (degree application only): _____

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 SF State and the person / the 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: _____