

**Office Use Only**

Country \_\_\_\_\_ Major \_\_\_\_\_

Need \_\_\_\_\_ GPA \_\_\_\_\_

Student ID Number \_\_\_\_\_

# Oregon State | Cascades

UNIVERSITY | C A M P U S

2600 NW College Way, Bend, Oregon 97701 USA

## INTERNATIONAL CULTURAL SERVICE PROGRAM APPLICATION

Institution to which you are applying \_\_\_\_\_

Year \_\_\_\_\_ and term \_\_\_\_\_ you expect to enroll.

1. Name: Mr.( ) Ms.( ) \_\_\_\_\_  
(underline family name)

2. Home Address (street, city, country) \_\_\_\_\_  
\_\_\_\_\_ Telephone Number \_\_\_\_\_

3. Current Mailing Address (if different) \_\_\_\_\_  
\_\_\_\_\_ Telephone Number \_\_\_\_\_

4. E-mail address: \_\_\_\_\_

5. Date of Birth: \_\_\_\_\_ 6. Citizenship \_\_\_\_\_  
Month Day Year

7. Type of visa held (check one)  F-I Student  Exchange Visitor J-I  U.S. Immigrant  Other  
\_\_\_\_\_ Have you (or someone on your behalf) applied for a U.S. permanent visa?  Yes  No  
(indicate type)

8. List any work experience you have had since leaving secondary school:

9. Have you attended a college or university in your country?  Yes  No

If yes, list colleges and universities with dates attended:

Name & Location

Dates Attended

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10. Are you currently enrolled or have you ever attended a college or university in the U.S.?  Yes  No If yes, average of your grades\_\_\_\_\_. If yes, list current and previous colleges or universities attended in the U.S., number of credit hours earned, and any financial aid received:

Name & Location	Dates Attended	Credit Hours Earned	Type of Aid	Amount
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11. List any activities and organizations in which you have participated and any honors you have received:

12. I will enroll as:  Freshman  Sophomore  Junior  Senior  Post-Baccalaureate  Graduate

13. First degree you plan to earn at this institution:  Bachelor's  Master's  Ph.D.

Major or field of study \_\_\_\_\_ Expected date of degree completion \_\_\_\_\_

Other degrees you plan to earn \_\_\_\_\_

14. What do you plan to do after completion of your studies at this institution? \_\_\_\_\_

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15. Are you married?  Yes  No Will your spouse (husband/wife) be with you?  Yes  No

Is your spouse a student?  Yes  No If yes, name of school \_\_\_\_\_

Is spouse a U.S. citizen?  Yes  No Name of spouse \_\_\_\_\_

Occupation of spouse \_\_\_\_\_ Annual income of spouse \_\_\_\_\_

16. Number of dependent children who will be with you \_\_\_\_\_

17. Father's Name \_\_\_\_\_ Age \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Age \_\_\_\_\_ Occupation \_\_\_\_\_

18. Total yearly income of father and mother (in U.S. dollars). Include salaries, investments, business or farm income, rental income, retirement income \$ \_\_\_\_\_

19. Number of persons dependent on parents' income:  Brothers  Sisters  Others  Self

Ages of persons dependent on parents' income: \_\_\_\_\_

20. Does your country have any restrictions on sending money abroad for educational expenses?  Yes  No

If yes, please explain: \_\_\_\_\_

21. Do you have friends or relatives in the U.S. who will give you financial assistance? \_\_\_Yes \_\_\_No

If yes, please explain: \_\_\_\_\_

22. How will you finance your return trip home? \_\_\_\_\_

23. Will you have use of a motor vehicle? (Not necessary for selection to program, but strongly recommended.)

\_\_\_Yes \_\_\_No If yes, is it insured? \_\_\_Yes \_\_\_No

Make \_\_\_\_\_ Year \_\_\_\_\_ Date of Purchase \_\_\_\_\_

Purchase Price \$ \_\_\_\_\_ Balance Owed \$ \_\_\_\_\_

In whose name is it registered with the Oregon Department of Motor Vehicles? \_\_\_\_\_

**Budget Information**

24. Please complete the following budget indicating the resources and expenses you will have for the next academic year (September to June). If you will be attending less time than an academic year, include only income and expenses for the term or terms you will be in attendance.

<b>A.</b>		<b>B.</b>	
<b>Resources for period from</b> _____	<b>to</b> _____	<b>Expenses for period from</b> _____	<b>to</b> _____
Anticipated cash or savings on hand at beginning of this period (Do not include anticipated summer savings)	US\$ _____	Tuition & Fees	US\$ _____
Amount from relatives, parents, or friends during this period	US\$ _____	Insurance (medical)	US\$ _____
Anticipated earnings during this period	US\$ _____	If on campus: room & meals	US\$ _____
Anticipated summer savings	US\$ _____	If off campus:	
Income of spouse (after payroll deductions)	US\$ _____	Rent	US\$ _____
Amount from:		Food	US\$ _____
Loans _____	US\$ _____	Utilities	US\$ _____
(Source)		Clothing	US\$ _____
Grants _____	US\$ _____	Medical & Dental	US\$ _____
(Source)		Books & Supplies	US\$ _____
Scholarships _____	US\$ _____	Recreation	US\$ _____
(Source)		Local transportation	US\$ _____
*Other sources of assistance (explain, below)	US\$ _____	*Other expenses (explain below)	US\$ _____
<b>TOTAL resources available for this period</b>	<b>US\$ _____</b>	<b>TOTAL expenses for this period</b>	<b>US\$ _____</b>

**Difference between columns A and B: US\$ \_\_\_\_\_**

\*Add information about circumstances affecting your ability to pay above expenses. Also, if you have already attended a U.S. institution, explain why you now need financial assistance (attach a separate sheet, if necessary):

25. Will you be able to provide the amount of money listed above in total resources (column A) for each academic year you plan to study at this institution? \_\_\_\_\_ Yes \_\_\_\_\_ No If no, why not? \_\_\_\_\_

26. New Students: Enter total amount of money you expect to have when you arrive at this institution: \$ \_\_\_\_\_

## Information about Cultural Service

The program is dedicated to involving international students in our communities as educational and cultural resources. Below are questions relating to the required cultural service as outlined in the application procedures. It is common for students on this program to speak about their country with a wide variety of age groups, school classes, and community organizations. Applicants who are able to share their cultures on more than one topic have an advantage over students who limit what they are prepared to contribute to one specialized area.

Be sure to answer completely the following questions (use additional sheets as necessary):

27. Native language \_\_\_\_\_ Other languages spoken \_\_\_\_\_

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28. Command of spoken English (check one) \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Fair \_\_\_\_\_ Poor

Give your TOEFL score (or equivalent test): score \_\_\_\_\_ name of test \_\_\_\_\_

29. List community projects and/or voluntary work you have performed:

30. As you will be called upon to share your culture with a wide variety of audiences, on a separate piece of paper list all the topics you are prepared to address as you represent your country and cultural background. Include a list of the materials you have to illustrate your talk (examples: slides, tapes, photographs, instruments, national dress, artifacts, etc.). Also, list what you can teach or demonstrate that reflects the cultural arts of your country (examples: artwork, dance, games, cooking, music, etc.).

31. It will also be helpful if you include any previous experiences (if any) of sharing your culture. What did you do? For what audience?

32. You must submit two recent letters of recommendation with your application. The recommendation letters should be from people who know you well, but should not be from relatives. They should attest to your ability to perform public speaking in the English language and/or provide the cultural service.

**Student Certification**

I affirm that all information reported on this application is true and complete to the best of my knowledge. I will promptly inform the International Student Adviser of any changes in the information submitted as part of this application. Failure to provide correct information will be cause for removal from the program. I am aware that this information may be subject to independent verification by the institution.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date