ATTENTION: Carmen Johnson

Deadline Friday, September 1, 2006
NYU-Stern Exchange & Visa Application

Semester(s) of Study- please check one

☐ Fall Semester: August 2006- December 2006


☐ Full Year: August 2006- May 2007

Personal Information

(You must list your name as it appears on your birth certificate, passport, and/or other official paperwork from your country. Do not list any nicknames.)

☐ Mr. ☐ Ms. Name ____________________________________________________________

Family                      First                      Middle

Date of Birth ______/______/______ Place of Birth __________________________________________

(Month / Day / Year)                                                City                                Country

Country of Citizenship ________________________ NYU I.D. Number _______________________________

Country of Permanent Legal Residence _____________________________________________________________

Complete Mailing Address: ______________________________________________________________________
_____________________________________________________________________________________________

Telephone Number _____________________________ E-mail address ______________________________

(Please note, you will be sent important information via e-mail. You must notify us if you change your e-mail address):

_____________________________________________________________________________________________

Your Home School (University) Name: ___________________________________________________________

Occupation or Position in country of legal permanent residence (please check one):

_X Undergraduate Student Name of Institution ________________________________

____ Graduate Student Name of Institution ________________________________

____ Other _____________ Name of Institution ________________________________

The purpose of this form is to: X Begin a new program (Accompanied by _____ immediate family members) 

☐ Extend an ongoing program

Funding Information

The exchange visitor must have financial resources adequate to provide for all expenses in the United States. These expenses include tuition, fees, required health insurance and living expenses estimated at $1400 per month.

Sources of financial support for the Exchange Visitor (please check):

Tuition: _X__Waived _____ NYU Funding _____Personal Funds _____Other ______________________

Living Expenses: _____ NYU Funding _____Personal Funds _____Other ______________________
**NYU Program Information – To be completed by Stern**

School Requesting Exchange Visitor:  

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<tr>
<th>Dept</th>
<th>UG International Programs Office</th>
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<th>Dates of Program</th>
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<td>Beginning Date to Ending Date</td>
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When the IAP66 is completed, please:  

- [X] call for pick up

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<thead>
<tr>
<th>Name</th>
<th>Extension</th>
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<tbody>
<tr>
<td>Carmen Johnson</td>
<td>x80277</td>
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- [ ] Mail via campus mail:

<table>
<thead>
<tr>
<th>Campus Address</th>
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- [ ] Mail directly to student:

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<th>Student Address</th>
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Requested By: Carmen Johnson  

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<thead>
<tr>
<th>Name</th>
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<tbody>
<tr>
<td>Carmen Johnson</td>
<td>Senior Associate Director, International Programs</td>
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Please send completed application by email or fax to:

Carmen Johnson, Office of International Programs
40 West Fourth Street, Suite 203, NY, NY 10012-1118

Telephone: (212) 998-0277  Fax: (212) 995-4200