National Student Exchange
Application Instructions

Priority Application Deadline: Feb. 21, 2014 (for Fall 2014 Exchange)

Prior to completing this application, please read:
• NSE eligibility requirements, policies, and procedures in the NSE Student Handbook
• NSE Directory listings for all schools listed on your application

Application Fee: $125 (for applications submitted prior to May 1, 2014)
Please remember to include a nonrefundable Application Fee, (check or money order) made payable to Cal State East Bay.

Payment Plans:

Plan A: Student pays the host institution's in-state tuition.
Plan B: Student pays Cal State East Bay’s tuition.

Some universities only have one payment plan while others allow students to choose. Note that for either payment plan, room and board and any fees which are assessed as a condition of enrollment (i.e. fees for laboratory courses, general service, computer, art supplies, etc.) are always paid to the host campus.

A complete NSE application includes:
☐ Application
☐ Unofficial transcript
☐ Recommendations (Sealed or sent separately)
  ► From your major department if you are an upper division student. If you are a lower division student, please submit a recommendation from a faculty member or academic advisor who knows you well.
☐ Statement of Purpose Essay
☐ Language Proficiency Report (If applicable)
☐ Application Fee of $125

RETURN THIS FORM BY FEB. 21 to receive priority placement (applications received after February 21 will be considered for post-conference placement, as space is available):

Kelly Moran
Center for International Education (LI 2550)
Cal State East Bay
25800 Carlos Bee Blvd.
Hayward, CA 94542

For questions, call 510-885-2903 or email kelly.moran@csueastbay.edu
# National Student Exchange Application

Please print very clearly.

## Contact Information

1. Name: __________________________ / __________________ / __________________
   First        Middle        Last

2. Net ID: __________________________

3. Current Address: __________________________________________________________
   Number/ Street
   City        State        Zip

4. Permanent Address (if different from above): __________________________________
   Number/Street
   City        State        Zip

5. Current Telephone: __________________________

6. Permanent Telephone: __________________________

7. Alternate Phone: __________________________

8. Horizon Email: __________________________

9. Alternate Email: __________________________

   **The CSUEB NSE Coordinator will send email only to this address.**

10. Contact in case of an emergency: __________________________ / __________________
    Last Name        First Name

11. Relationship to applicant: __________________________

12. Telephone: (_______) ________

13. Address: __________________________________________________________
    Street
    City        State        Zip

## Demographic Information

1. Date of Birth __________ / __________ / __________
   month        day        year

2. Gender: □ Female       □ Male

3. Currently Living on-campus? □ Yes       □ No

4. CA State Resident? □ Yes       □ No

5. U.S. Citizen/Resident? □ Yes       □ No
   If no, indicate visa status: □ F-1 □ J-1 □ Other: ______

6. Motive for Participation
   □ Access different courses/faculty
   □ Evaluate graduate schools
   □ Live in a different area
   □ Personal growth
   □ Participate in host’s international program
   □ Enter host’s honors program
   □ Language Study
   □ Look for future employment
   □ Other: __________________________

7. How did you hear about NSE? __________________________
1. Current Class Level
- Freshman (less than 45 units)
- Sophomore (45-89 units)
- Junior (90-134 units)
- Senior (135 or more units)
- Second Bachelor’s Degree
- Master’s Degree

2. Class status during exchange:
- Sophomore
- Junior
- Senior
- Graduate

3. College GPA: Cumulative

4. Major(s): __________________________

5. Minor __________________________

6. Do you need to take classes in your major while on exchange?  
- Yes  
- No

7. Are you requesting Financial Aid from Host University (only if you are on Plan A)?  
- Yes  
- No

8. Are you currently receiving financial aid?  
- Yes  
- No

9. Where would you reside at the exchange school?  
- On-campus  
- Off-campus

10. What languages do you speak/read/write? ____________________________________

   Please note if you plan to exchange to a campus in Puerto Rico, you must be certified for proficiency in Spanish. If you plan to exchange to the Universite de Sherbrooke in Quebec, you must be certified for proficiency in French. If English is not your first language, for all other NSE locations you must demonstrate proficiency in English. Language proficiency must be determined prior to placement.

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**National Student Exchange Application**

**Scholastic Information**

Number of TOTAL units in progress at time of application:

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**Exchange Information**

Period of Exchange:
- Academic Year
- Fall 20____
- Spring 20____
- Summer 20____

List in priority the institutions you wish to attend and the payment plan(s) you could use. Please be sure that if placed at your second, third, fourth or fifth choice, you plan to participate in the exchange.

<table>
<thead>
<tr>
<th>Name of Institution</th>
<th>Plan (A/B)</th>
<th>Year or Fall Qtr/Wtr</th>
<th>On Campus or Of Campus Housing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. _________________</td>
<td>☐ A or B (prefer ____); ☐ A only; ☐ B only _______</td>
<td>☐ On-Campus Required ☐ On-Campus Preferred ☐ Off-campus</td>
<td></td>
</tr>
<tr>
<td>2. _________________</td>
<td>☐ A or B (prefer ____); ☐ A only; ☐ B only _______</td>
<td>☐ On-Campus Required ☐ On-Campus Preferred ☐ Off-campus</td>
<td></td>
</tr>
<tr>
<td>3. _________________</td>
<td>☐ A or B (prefer ____); ☐ A only; ☐ B only _______</td>
<td>☐ On-Campus Required ☐ On-Campus Preferred ☐ Off-campus</td>
<td></td>
</tr>
<tr>
<td>4. _________________</td>
<td>☐ A or B (prefer ____); ☐ A only; ☐ B only _______</td>
<td>☐ On-Campus Required ☐ On-Campus Preferred ☐ Off-campus</td>
<td></td>
</tr>
<tr>
<td>5. _________________</td>
<td>☐ A or B (prefer ____); ☐ A only; ☐ B only _______</td>
<td>☐ On-Campus Required ☐ On-Campus Preferred ☐ Off-campus</td>
<td></td>
</tr>
</tbody>
</table>
Recommendations

List the faculty member who is writing a recommendation for this program. If you are an upper division student, please submit a recommendation from a faculty member in your major department. If you are a lower division student, you may choose to ask any faculty member or academic advisor.

1. ________________________________  ________________________________
   Faculty Name                          Department/office

Statement of Purpose

Please use a separate piece of paper to answer the following questions. Each answer should be between about 150-400 words.

1. What are your academic expectations while on exchange and how will it contribute to your degree at CSUEB? Do you expect to take courses for your major and general education requirements or are you interested in non-major courses? What courses are you considering?

2. Why have you selected the campuses you have listed as possible exchange sites?

Release of Information

The collection, retention, and dissemination of your records and information about you are subject to federal regulation under the Family Education Rights and Privacy Act of 1974. You are responsible for specifying the persons or agents who have access to your records. Therefore, it is necessary that we obtain your permission to request and release information pertinent to your exchange. Please read the following statements and sign below:

• I understand that it will be necessary for my campus to obtain certain information about my academic and non-academic record in order to: 1) ascertain my eligibility and suitability for an exchange through NSE, and 2) facilitate my exchange after it is arranged. I hereby grant permission to the NSE coordinator and/or designee to obtain information that is appropriate to my application and participation in the exchange including, but not limited to, letters of recommendation, permanent academic records and transcripts, conduct, fiscal records, all for the purposes of exchange placement and participation, continuation, or termination.

• I give permission to the NSE coordinator and/or designee to contact appropriate personnel in order to verify that I am under no disciplinary action for violation of codes of academic and student conduct and/or that I have no judicial cases pending which would invalidate my eligibility for exchange.

• I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to my home NSE Coordinator, designee, and those individuals/committees responsible for reviewing and approving my application for exchange participation.

• I hereby release information contained in my application, letters of recommendation, transcripts, and other information required as part of the NSE application process to the National Student Exchange Central Office and to the NSE host institution at which I am placed.

Signature _________________________________________________ Date ____________

Return this application to:
Kelly Moran/ NSE Coordinator
Center for Int'l Education (LI 2550)
Cal State East Bay
25800 Carlos Bee Blvd, Hayward, CA 94542
Tel: 510-885-2903

National Student Exchange Faculty Reference
Applicant Section:

Applicant Name: _________________________________ Net ID: __________________

Host Institution(s) to which you are applying: ______________________________________

________________________________________  Date: __________________

Evaluator Section:

The National Student Exchange provides qualified students with the opportunity to attend another university within the United States and its territories for up to one year. There, they may take advantage of the unique geographic, cultural, and academic characteristics of the institution and region. The experience is academically and personally demanding and requires intellectual discipline, maturity and motivation. Your recommendation will form a critical part of the total picture of the applicant. Thank you for taking the time to assist your student and the program.

Name: __________________________________________

Position: ___________________________    Department: ___________________________

1. How well do you know the applicant? (Please check most appropriate)

  ❑ Extensive contact in a variety of settings
  ❑ Well acquainted in the classroom environment
  ❑ Limited contact in the classroom environment
  ❑ Other ________________________________

2. In comparison to other students whom you have known at comparable stages in their careers, please rate the applicant in these areas. (Please check most appropriate)

<table>
<thead>
<tr>
<th>Excellent</th>
<th>Very Good</th>
<th>Average</th>
<th>Below Average</th>
<th>Unable to Judge</th>
</tr>
</thead>
</table>
   Academic Ability | ❑ | ❑ | ❑ | ❑ | ❑ |
   Maturity | ❑ | ❑ | ❑ | ❑ | ❑ |
   Cooperation and Adaptability | ❑ | ❑ | ❑ | ❑ | ❑ |
   Initiative and Motivation | ❑ | ❑ | ❑ | ❑ | ❑ |
   Open-mindedness | ❑ | ❑ | ❑ | ❑ | ❑ |
   Integrity | ❑ | ❑ | ❑ | ❑ | ❑ |

3. Exchange to another campus would be appropriate for the applicant: ❑ Yes    ❑ No

4. REMARKS: Based on your knowledge of the applicant, please comment on his/her ability to participate and profit from an exchange experience. Please use the reverse of this page, or attach a separate page on department letterhead with signature.