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A DANIEL AND A DAN		nternational Admissions
1928 DESTRUCTION	Application for I-20	2500 E. Nutwood Ave. Fullerton, CA 92831 USA (714) 879-3901 FAX (714) 681-7224 Email: immigration@hiu.edu
Contraction of the second second	Please print using capital letters.	
1. Legal Name: Family/Last	First	Middle
2. Foreign Home Address:		
City:	Province/State:	
Country:	Postal Code:	
3. Date of birth: $\frac{1}{month} / \frac{1}{day} / \frac{1}{year}$	4. Gender (check one)	: 🗅 Male 🕞 Female
7. Country of citizenship:		

8. Field of study: _____

9. Degree: (language training, bachelor's)

10. List any dependents who will be accompanying you.

Last Name	First Name	Middle Name	Date of Birth MM/DD/YY	Country of Birth	City of Birth	Country of Citizenship	Relationship: Child/Spouse

11. *Hope* reserves the right to require one full year of tuition before issuing an I-20. At a minimum, as part of funding verification we require an initial deposit of 50% of a full year's tuition for the program being applied to. The deposit and advance payment of tuition will remain on the student account until the student arrives at *Hope*, and will be used to pay tuition for the first year. The deposit will be refunded in full, minus wire fees, if the student is not issued a visa. If the student is unable to attend, the money will be refunded after the arrival date on the I-20 has passed AND the I-20 has been returned to *Hope*.

12. Signature: _____

Date:	/		_/		
	month /	day	7	year	

If you have any questions, please do not hesitate to contact International Student Programs at 714-879-3901, extension 1698 or immigration@hiu.edu

Return completed application to Hope International University, Attn: International Student Programs 2500 E. Nutwood Ave., Fullerton, CA 92831 US