

THE CALIFORNIA STATE UNIVERSITY INTERNATIONAL PROGRAMS
STUDENT INFORMATION CARD

Last Name	First Name	ID#	Overseas Center/Program
Major	Minor	Cumulative GPA	Circle one: Fr Soph Jr Sr Grad

Mailing address: Number ()	Street ()	Apt. No	City	State	Zip
Home telephone	Day or message telephone		E-Mail Address		

How did you hear about IP?: Received letter Classroom visit Faculty Member Poster Newspaper
Former participant Other _____

Application given to student	Date received	Date sent to IP
Date	By	Application
Withdrawal: _____		Faculty Recommendations from:
Date/Reason	Foreign Language Faculty Recommendation from:	
STAFF COMMENTS	Transcripts from:	