

# International Application for Graduate Admission

**(not for use by U.S. citizens and permanent residents)**

Follow the instructions for each question carefully. Type or print in ink all requested information.

**1. Name** \_\_\_\_\_  
family name first name middle name

Use the name listed on your **passport**. If there are any discrepancies between this name and the name on any of your application documents, notify the Office of International Admissions by printing the correct name at the top of the documents.

**2. Sex**       Male       Female

**3. Date of birth** \_\_\_\_\_  
(month/day/year)

**5. Ethnic origin** (check only one)     Asian or Pacific Islander     Black, not of Hispanic origin     Hispanic  
 White, not of Hispanic origin     Other

**6. Proposed degree and curriculum** (check only one)  
 Do not fill out this section without consulting the enclosed specialization and curricula section.

**Degree:**      **Master's degree** \_\_\_\_\_      **Ph.D.** \_\_\_\_\_      **Post-baccalaureate certificate** \_\_\_\_\_

**Curriculum:** \_\_\_\_\_  
school/college major/specialization

**7. Semester and year of entry** (check only one)     Fall 20\_\_\_\_     Spring 20\_\_\_\_     Summer 20\_\_\_\_

**8. Present address**

Number and street \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ Postal code \_\_\_\_\_

Present telephone number \_\_\_\_\_ E-mail \_\_\_\_\_

International Admissions will be able to contact you at your present address until (month/day/year) \_\_\_\_\_

**9. Permanent address** (home country required by USCIS)

Number and street \_\_\_\_\_

City \_\_\_\_\_ Country \_\_\_\_\_ Postal code \_\_\_\_\_

Telephone number \_\_\_\_\_ E-mail \_\_\_\_\_

**10. Place of birth (country)** \_\_\_\_\_

**11. Country of citizenship** \_\_\_\_\_

**12. First language** \_\_\_\_\_

**13. Visa information** (check only one)

If you are currently in the United States on a valid visa, indicate which type.

**Please photocopy your visa and immigration documents and submit them with your application.**

- F-1 (Student visa)**
 **F-2 (Dependent on F-1 visa)**  
 **H-1-B (Temporary worker visa)**
 **H-4 (Dependent on H visa)**  
 **J-1 (Exchange visitor visa)**
 **J-2 (Dependent on J-1 visa)**  
 **B-2 (Visitor for tourism visa)**
 **Other** \_\_\_\_\_  
**Date visa issued** \_\_\_\_\_ **Date visa expires** \_\_\_\_\_

**14. Educational background**

List every post-secondary institution, college or university you have attended or are now attending, including part-time, non-degree and summer studies.

Office use only Do not write in this column.	Name _____ Location	Dates of attendance From month/year – to month/year	Major field of study	Degree, certificate or diploma Date awarded or to be awarded

**15. Have you ever applied for or attended any program at VCU before?**  Yes  No

If yes, please indicate the program, semester and year for which you applied.

**Program** \_\_\_\_\_  **Fall 20** \_\_\_\_\_  **Spring 20** \_\_\_\_\_  **Summer 20** \_\_\_\_\_

## 16. Standardized testing

Indicate the tests you have taken or plan to take and their respective scores. (Review the specialization and curricula section.)

	Date taken	Score
<input type="checkbox"/> TOEFL (Test of English as a Foreign Language)	_____	_____
<input type="checkbox"/> IELTS (INT English Language Testing Service)	_____	_____
<input type="checkbox"/> GRE-APT (Graduate Record Exam – Aptitude)	_____	_____
<input type="checkbox"/> GRE-ADV (Graduate Record Exam – Advanced)	_____	_____
<input type="checkbox"/> GMAT (Graduate Management Admissions Test)	_____	_____
<input type="checkbox"/> MAT (Miller Analogies Test)	_____	_____
<input type="checkbox"/> LSAT (Law School Admission Test)	_____	_____
<input type="checkbox"/> DAT (Dental Aptitude Test)	_____	_____
<input type="checkbox"/> MCAT (Medical College Admission Test)	_____	_____

## 17. References

List the names, addresses and positions of the three persons, preferably professors, supervisors or professionals, who are completing reference forms for you.

4a. **Name and position:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

b. **Name and position:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

c. **Name and position:** \_\_\_\_\_  
**Address:** \_\_\_\_\_

## 18. How did you first hear about VCU? (check all that apply)

Contact with VCU students/alumni

Contact with VCU faculty/staff

Friends/family in the United States

Friends/family in your native country

Teacher/adviser at school

Internet: Which Web site? \_\_\_\_\_

Guide: Which guide? \_\_\_\_\_

Fair visit by VCU in your country: \_\_\_\_\_  
name location date

Which of these was the most helpful/influential? \_\_\_\_\_

What influenced you to apply? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that all information supplied on this form and all credentials submitted in support of my application are complete and accurate. I understand that withholding or giving false information may make me ineligible for admission and future enrollment.

**Applicant's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Personal statement**

Please write a personal statement in which you discuss the following: your reasons for seeking further education in the United States, including your career goals and how the program you are applying to will help you meet those goals; prior work/life experiences that relate to your interest in and aptitude for the program to which you are applying; and your perception of your intellectual capability to complete the program successfully. (Attach a separate sheet if necessary.)

**Please return this completed application to:**

**Virginia Commonwealth University  
Office of International Admissions  
P.O. Box 843043  
Richmond, Virginia 23284-3043  
U.S.A.**

**Phone: (804) 828-6016  
Fax: (804) 828-1829  
E-mail: [vcuia@vcu.edu](mailto:vcuia@vcu.edu)**