California University of Pennsylvania
Application for International Applications to the School of Graduate Studies & Research

NOTE: this application and the requirements are only for admission to face-to-face (on-ground) program. International students who plan to enroll in online (Global Online) programs offered by California University of Pennsylvania but not reside in Pennsylvania may complete the standard application process.

California University of Pennsylvania (Cal U) welcomes applications from students from countries other than the United States. All international students who apply for graduate studies must meet the entrance requirements for graduate school, their chosen academic program, and the requirements listed below. Final admission is contingent upon clearance from the education authorities of the home country and from the Immigration and Naturalization Service of the United States. Federal regulations require that an F-1 visa student carry a minimum nine (9) credit full-time course load. For admission, the following must be submitted:

1. Completed Application for International Admissions (below) plus $25 non-refundable application fee, payable online
2. Document-by-document evaluation of transcripts to verify the possession of the equivalent of a 3.00 overall grade point average in the baccalaureate degree in the United States
3. Certified English translation of official transcripts that verify earning the equivalent of a baccalaureate degree in the United States.

Transcript Evaluations: For 2 and 3 above, one of the following organizations may be used to provide the required service. Contact the organization, request or download an application, complete the application listing “California University of Pennsylvania, School of Graduate Studies & Research” as the recipient, and return it to the organization with the required fees and credentials. Transcript evaluations can take up to four weeks or more to complete after all documents are received. Check with the service(s) for their timelines and specific fee structure(s).

- Josef Silny & Associates, Inc. International Education Consultants, 7101 SW 102 Avenue, Miami, FL 33173, Phone (305) 273-1616, Fax (305) 273-1338, email info@jsilny.com, Website www.jsilny.com
- World Education Services, Inc. P.O. Box 745, Old Chelsea Station, New York, NY 10113-0745, Phone (212)-966-6311, Fax (212)-966-6395, Website www.wes.org

Canadian Applicants: Students holding undergraduate degrees from a Canadian college or university need only to submit their official transcripts directly to the School of Graduate Studies & Research. If they are similar to the materials from the United States model, they will be evaluated locally. If not, students will be required to comply with the above international student policy.

4. Official copy of a valid teaching certificate (if application is being made to a Master of Education program).
5. Official copy of the TOEFL test showing a minimum score of 550 on the paper-based test, 213 on the computer-based test, or 80 on the internet-based test. An official copy of an IELTS with a minimum score of 6.0 may be substituted for the TOEFL score. Official test scores must be sent directly from the testing center. Photocopies are not acceptable.

6. Affidavit of Financial Support (below).

For more information, contact:
California University of Pennsylvania, School of Graduate Studies & Research
Email: gradschool@calu.edu
Phone: (724) 938-4187
Application for International Admission to the School of Graduate Studies and Research

1. This form must be completed by each individual who wishes to enroll in graduate studies at California University of Pennsylvania.
2. Official transcript from a baccalaureate degree granting institution is required. See description in the instructions on page 1 of this document. Transcripts for degrees earned at California University of Pennsylvania are not required.
3. Incomplete applications will not be processed.
4. A nonrefundable $25 application fee must be paid online at www.calu.edu/apply-now.htm.

Name:  
Last        First              Middle  

Permanent International Address (Required):
Street Address  
City  
State/Province  
Postal Code  
Country  
Telephone  
Email  

U.S. Address: (If applicable):
Street Address  
City  
State/Province  
Zip Code  
State  
Telephone  
Email  

Indicate Gender, Ethnicity, and Race:

<table>
<thead>
<tr>
<th>Gender</th>
<th>Ethnicity</th>
<th>Race</th>
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| ❑ Male | ❑ H - Hispanic/Latino – A person of Cuban, Mexican, Puerto Rican, South or Central America or other Spanish culture or origin, regardless of race
| ❑ Female | ❑ N - Not Hispanic/Latino                      | ❑ 2 – Alaskan Native/American Indian – A person having origins in any of the original peoples of North and South America (including Central America, and who maintains tribal affiliation or community attachment
|                                                                             | ❑ 3 – Asian – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent
|                                                                             | ❑ 4 – Black/African-American – A person having origins in any of the black racial groups of Africa
|                                                                             | ❑ 5 – Native Hawaiian/Pacific Islander – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands
|                                                                             | ❑ 6 – White – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

Please Attach Photo
Country of Birth: ____________________________  Country of Citizenship: ____________________________

Date of Birth: ____________________________

Married: _____  Single: _____  Other: ______

Person to be notified in case of emergency:

A) In the U.S.

Name: ____________________________  Relationship: ____________________________

Address: ____________________________  Phone Number: ____________________________

City: ____________________________  State: ______  Zip Code: __________

B) In Home Country

Name: ____________________________  Relationship: ____________________________

Address: ____________________________  Phone Number: ____________________________

City: ____________________________  State/Province: ____________________________

Postal Code: ____________________________  Country: ____________________________

Person responsible for payment of bills:

Name: ____________________________  Relationship: ____________________________

Address: ____________________________  Phone Number: ____________________________

City: ____________________________  State/Province: ____________________________

Postal Code: ____________________________  Country: ____________________________

Enrollment status – check all appropriate items to describe your enrollment:
__  full-time enrollment Main Campus (California, PA)
__  full-time enrollment Southpointe Campus (Canonsburg, PA)

Curriculum in which you desire to enroll – select one:
__  0444 Autism Spectrum Disorder Certification (Fall, Spring, Summer starts)
__  0330 Athletic Training (Summer start only)
__  0328 Business Administration (Fall, Spring, Summer starts)
__  0303 Communication Disorders (Fall start only)
__  0720 Clinical Mental Health Counseling (Fall, Spring, Summer starts)
__  0350 Master of Social Work (Fall start only)
__  0908 Teacher Education Grades PreK-4 (Master’s-only without certification) (Fall, Spring, Summer starts)

Semester and year in which you plan to enroll:  □ Fall  □ Spring  □ Summer  Year: 20____
Have you been expelled or dismissed from a college or university? □ No □ Yes If yes, please explain on a separate page.

Have you attended graduate school previously? □ No □ Yes
If Yes, where? ____________________________ Number of credits earned: ______

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<tr>
<th>Name &amp; Location</th>
<th>Dates Attended</th>
<th>Course/Major/Minor</th>
<th>Degree Earned</th>
<th>Month &amp; Year</th>
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<tr>
<td>Undergrad Study College or University</td>
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<td>Graduate Study College or University</td>
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**Services for Students with Disabilities:** The Cal U Office for Students with Disabilities provides services to students with disabilities. Students with disabilities are encouraged to contact the Office for Students with Disabilities prior to arriving on campus. If applicable, call 724-938-5781 for information about application procedures, services, and required documentation.
FINANCIAL CERTIFICATE

All international students must provide evidence of sufficient funding for one year of graduate school as part of the admissions process before the international student advisor will issue a Certificate of Eligibility for Nonimmigrant F-1 Student (also referred to as an I-20).

Evidence of sufficient funding in the form of acceptable notarized affidavits, bank statements, etc., must verify/demonstrate that the student requesting admission possesses financial resources totaling a minimum baseline amount of $30,865 for one year of study (includes graduate tuition, fees, housing/meals, books/supplies) to meet the financial admission requirement. The overall amount per semester for a full-time student is $15,432. Other cost factors may either increase or decrease this total amount (see below). This requirement is not repeated for a second or more year of study, but it is the student’s responsibility to meet university costs and all other expenses throughout the entirety of his or her education to remain eligible for the I-20 for study.

PLEASE NOTE: United States Federal regulations for F-1 students do not permit paid off-campus work. On-campus work opportunities are very limited. A limited number of graduate assistantships are available, but international students must be certain of adequate funds for their academic and living expenses before enrolling. International students should contact the School of Graduate Studies & Research regarding graduate assistantships.

Tuition
- Non-Pennsylvanian Resident Tuition Cost is estimated at $12,920 ($6,146 per semester) for a nine (9) credit load

Fees
- Total fees cost is estimated at $3,906 ($1,953 per semester).

Housing/Meals
- The cost for on-campus housing/meals is estimated at $10,846 ($5,423 per semester). This cost provides you and a roommate with a 2 bedroom/2 bath, double-occupancy suite in a campus residence hall and a 14 meal per week dining plan. Any on-campus living contract requires that a meal plan be purchased. Costs may be adjusted accordingly for a student who provides evidence of a reduced cost for off-campus housing/meals arrangements.

Books/Supplies
- The estimated cost for books and supplies is $3,821 ($1,911 per semester). This estimated cost may vary greatly from semester-to-semester.

Other Costs
- Each dependent(s) accompanying the student must be declared, and funding must be sufficient and verified to support each ($6,000 per year for a spouse; $3,000 per year for each child).
- Applicants must also provide proof of adequate health insurance coverage in the United States.

International Applicants are REQUIRED to certify that they will have available the sum of $30,865 for their own expenses during the first academic year at California University of Pennsylvania, exclusive of travel expenses. You should also indicate how you will meet your expenses for subsequent years of study if you expect your program to require more than one year. Students who plan to stay in the United States through the summer will need an additional $3,000 for that four-month period. In computing your expenses, you should bear in mind that students holding student (F-1) visas will not be authorized to work except under extraordinary circumstances. Therefore, the applicant should not look for employment, either part-time during the academic year or full-time during the summer, as a significant means of support while at California University of Pennsylvania. Under no circumstances are students permitted to work full-time during the academic year. If you are a married student and plan to bring your spouse and/or children, a proportionately larger amount must be certified, on the basis of at least an additional $6,000 per year ($500 per month) for your spouse and $3,000 ($250 per month) for each child. (Note that spouses of F-1 Student visa holders are not permitted to work under any circumstances).

You are likely to need this documentation to prove to the United States Consular officials that you have sufficient funds. We suggest, therefore, that you make copies of all documents for this purpose.

Please check appropriate box:

______ I plan to come alone

______ I plan to bring the following dependents with me:
(please list and specify relationship to you):

______________________________________________
______________________________________________

_______ I plan to have dependents come later

Please check appropriate box:    ____ I do not expect to be at California University of Pennsylvania for more than one academic year.
                              ____ I expect my program of study to require:
                                                  _____ Two years
                                                  _____ Three years
                                                  _____ Four years

Affidavit of Financial Support

In consideration of and in exchange for the acceptance of (Enter Student’s Name) ____________________________, who is my (Enter Relationship) ____________________________, as a student at California University of Pennsylvania for the academic year beginning (Enter Date) ________________, I solemnly swear that I am able, willing, and do promise to provide him/her the minimum amount of $_________ ($30,865 for one calendar year) payable in U.S. dollars for his/her tuition and living expenses during said academic year at California University of Pennsylvania. Evidence of my financial resources in the form of a bank statement or employer's statement accompanies this affidavit of support.

Sworn to and subscribed before me this ________ day of ____________________________, 20____.

______________________________________________
Signature of Sponsor

______________________________________________
Address of Sponsor:

______________________________________________

______________________________________________
Signature of Notary

Place Notary's Seal Here

RETURN TO:
California University of Pennsylvania
School of Graduate Studies & Research
250 University Avenue, Box 91
California, Pennsylvania, U.S.A. 15419
**Affidavit of Financial Support for:**

Last Name: ___________________________  First Name: ___________________________

The I-20 form will not be authorized or released from the institution until this form has been completed in its entirety and returned.

Student’s Source of Funds:  
- □ Personal or Family Savings  
- □ Parents  
- □ Sponsor  
- □ Your Government (Name of Agency): ___________________________
- □ Other (Name of Source): ___________________________

(please check all that apply)

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<tr>
<th>Student’s Source of Funds</th>
<th>1st Year</th>
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Signature/Institution

Signature of Provider of Funds: ___________________________  Institution (If applicable): ___________________________
Address: ____________________________________________  Date: ___________________________

Signature of Provider of Funds: ___________________________  Institution (If applicable): ___________________________
Address: ____________________________________________  Date: ___________________________

Total amount of money you expect to have when you arrive at this institution: U.S. Dollars ___________________________

Do you plan to attend summer school?  □ Yes  □ No

Do you plan to remain in the U.S. during the summer?  □ Yes  □ No

**NOTE:** If you do not register within one year of acceptance, you must reapply.

I understand that the above statements are true to the best of my knowledge. Any false information may be used as grounds for denial or dismissal.

I also realize that credentials filed in support of this application become the final property of California University of Pennsylvania.

Applicant’s Signature: ___________________________  Date: ___________________________

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<th>ACTION ON APPLICATION</th>
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<td>□ APPROVED  □ CONDITIONAL APPROVAL  □ NOT APPROVED</td>
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Undergraduate Grade Point Average: ________________
Date of Action: ___________________________
Comments: ___________________________

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**NONDISCRIMINATION POLICY**

California University of Pennsylvania is an academic community dedicated to the ideals of justice, fairness and equal opportunity for all. In compliance with federal and state laws, the university is committed to providing equal educational and employment opportunities for all persons without regard to race, color, sex, religion, national origin, age, disability, ancestry, sexual orientation, or status as a disabled or Vietnam-era veteran. The university will not tolerate racial, ethnic or sexual discrimination. Sexual harassment is considered by law to be a form of sexual discrimination and is, therefore, unacceptable. Direct equal opportunity and affirmative action inquiries or complaints to the Special Assistant to the President for EEO/University Ombudsperson, Office of Social Equity, South Hall 112, (724) 938-4014. Direct inquiries regarding services or facilities accessibility to the ADA/504 Compliance Officer, Office for Students with Disabilities, Residence Hall B, (724) 938-5781. Direct Title IX inquiries to the Title IX Coordinator, Office of Social Equity South Hall 112, (724) 938-4014.