

Summer Session Application 2007

Undergraduate and Graduate Programs



STANFORD
UNIVERSITY

Application deadline: June 22, 2007

You may apply online at summer.stanford.edu or use this form to apply by mail, or fax. **Electronic application is highly encouraged.** Please type or print clearly if submitting this form by mail or fax.

Do not use this form to apply to the following special programs: Asian Language Program-Chinese, Hopkins Marine Station, English for Foreign Students. Applications for these programs can be obtained from the respective website for each.

Do not use this form if you are a current matriculated Stanford undergraduate or graduate student. Go directly to Axxess to register and add classes.

If you plan to attend Stanford as a transfer student, or an incoming undergraduate or graduate student, please contact the Summer Session office.

Undergraduate and Graduate Programs
STANFORD UNIVERSITY
482 Galvez Street
Stanford, CA 94305-6079
T 650-723-3109
F 650-725-6080
summersession@stanford.edu
summer.stanford.edu

APPLICANT INFORMATION

Name _____
Last/Family _____ First _____ Middle _____

Email _____
(Please provide an address that you will check regularly from now until the end of August 2007. The Summer Session office will send email, including your admission materials, to this address.)

Mailing Address: Any correspondence we need to mail will be sent to this address until May 1, 2007. Thereafter, all correspondence will be sent to your permanent address.

Street _____ Phone (Area Code/Number) _____

City _____ State/Province _____ Zip Code _____ Country _____

Permanent Address (if different from above)

Street _____ Phone (Area Code/Number) _____

City _____ State/Province _____ Zip Code _____ Country _____

DEMOGRAPHIC/MISCELLANEOUS INFORMATION

Female Male
 Date of Birth (month/day/year) _____ Birthplace (State/Country) _____ U.S. Social Security Number (last 4 digits only) _____ Gender _____
 (e.g., 0 | c | t | 1 | 9 | 1 | 9 | 9 | 0)

Ethnic Background for U.S. Citizens and U.S. Permanent Residents. (check all that apply)

- Black/African American Mexican American/Chicano White Native Hawaiian
 American Indian/Alaska Native (Indicate Tribal Affiliation) _____ Asian American, Pacific Islander (Identify) _____
 Other Hispanic/Latino (Identify) _____ Other (Identify) _____ Decline to State

How did you learn about Stanford's Undergraduate and Graduate Programs? (check all that apply)

- Web Friend/Family Poster Newspaper/Magazine _____
 On Campus Visit Teacher/Counselor Postcard Other _____

EDUCATIONAL BACKGROUND

High School _____
Institution Name _____ City/State/Country _____ Dates Attended (MM/YY) _____ Degree _____ Anticipated Graduation/Graduation Date (MM/YY) _____

Undergraduate _____
Institution Name _____ City/State/Country _____ Dates Attended (MM/YY) _____ Degree _____ Anticipated Graduation/Graduation Date (MM/YY) _____

Graduate _____
Institution Name _____ City/State/Country _____ Dates Attended (MM/YY) _____ Degree _____ Anticipated Graduation/Graduation Date (MM/YY) _____

Other _____
Institution Name _____ City/State/Country _____ Dates Attended (MM/YY) _____ Degree _____ Anticipated Graduation/Graduation Date (MM/YY) _____

HEALTH INSURANCE

Current health insurance coverage is required of all registered students. If you do not have U.S. health insurance you will automatically be assigned to Stanford's student health insurance, at a cost of \$656 for summer quarter. You may waive this coverage during the registration process if you are already insured. International students are required to enroll in Stanford's health insurance plan, unless you have proof of comparable U.S. coverage.

EMERGENCY CONTACT

Please provide contact information for a relative/friend that we can notify in the event of an emergency.

Name _____
Last/Family _____ First _____ Middle _____

Address _____
Street _____ Phone (Area Code/Number) _____

City _____ State/Province _____ Zip Code _____ Country _____

Email _____ Relationship _____

STANFORD ATTENDANCE

Have you applied to Stanford for the 2007 Autumn Quarter? Yes No

Have you ever been issued a Stanford ID Number? Yes No If yes, provide number _____

If you attended Stanford under another name, please print name here _____

REGISTRATION PLANS (check one)

- Summer Session Courses for Credit** Students requiring visas must register for a minimum of 8 quarter units. You will receive further registration information by email upon approval of your application.
- Summer Session Courses as an Auditor** Stanford cannot issue I-20s for international auditors.

HOUSING PLANS

- I want to live on campus. On-campus housing information will be sent by email upon approval of your application.
- I will be living off campus.

CITIZENSHIP INFORMATION

- U.S. Citizen or Dual Citizen U.S. Permanent Resident (Green Card Holder)
- International Student; Country of Citizenship _____

All international students enrolling in courses are required to have a valid F-1 Student Visa to enter the United States. You will be required to submit additional materials before an I-20 (Certificate for F-1 Student Visa) can be prepared for you. These materials will be sent to you, via email, once you are admitted. **Note:** Students should not enter on a Tourist Visa (B-1/B-2) or a WT Visa Waiver just prior to starting school if the intent is to go to school. Immigration law prohibits students from attending school on a Tourist Visa.

APPLICATION FEE (Non-Refundable)

- \$50 for U.S. citizens/dual citizens and U.S. permanent residents. The application fee may be paid by check or credit card.
- \$100 for international students. The application fee can be paid by international money order in U.S. dollars, a U.S. dollar check written on a U.S. bank, or by bank credit card (Mastercard or Visa). I-20 Certificate of Eligibility documents will be express mailed.

METHOD OF PAYMENT

- Check or money order enclosed. Please make payable to: **Stanford University**
- Please charge my credit card. Visa Mastercard

Credit Card Number _____ Expiration Date _____

Cardholder Name _____ Signature _____

APPLICANT Your signature below indicates that the information provided is, to the best of your knowledge, complete and accurate.

Signature _____ Date _____