

**One-on-One Exchange Program
Interest Form**

Personal Information

Last Name _____ First Name _____ Middle Initial _____

CSUF Student ID Number _____ Date of Birth _____
Month Day Year

Current Address _____
Street Number Street Name Apt. # City/State/Zip

Home Address _____
Street Number Street Name Apt. # City/State/Zip

E-mail address _____ Phone _____

(Please circle) Sex: M or F Country of Citizenship _____

Program of Study

Applying for: Fall _____ Spring _____
Year Year

What is your degree objective? _____ Current Campus GPA _____

What is your major/minor/option? _____
Major Minor

What is your current standing? (Please circle) Freshman Sophomore Junior Senior Graduate

Do you need financial assistance? Yes No

Please check the Exchange Program you are interested in:

- Vorarlberg University of Applied Sciences - Dornbirn, Austria*
- University of Sao Paulo - Sao Paulo, Brazil*
- Univesidad del Desarrollo - Santiago, Chile*
- Hong Kong Baptist University - Hong Kong, China*
- Ecole Superieure de Commerce de Dijon - Dijon, France*
- Ecole Superieure du Commerce Exterieur - Paris, France*
- France Business School - Poitiers/ Tours, France*
- ISC, Paris - School of Management - Paris, France*
- Berlin School of Economics and Law - Berline, Germany*
- Duesseldorf University of Applied Sciences - Duesseldorf, Germany*
- European Business School - Rheingau/ Wiesbaden, Germany*
- Nuertingen-Geislingen University - Nuertingen/ Geislingen, Germany*
- University of Mannheim - Mannheim, Germany*
- University of Münster, Germany*
- Universita di Pisa - Pisa, Italy*
- Korea University - Seoul, Korea*
- Seoul National Universit - Seoul, Korea*
- La Salle University - Barcelona, Spain*
- Jonkoping International Business School - Jonkoping, Sweden*
- Chulalongkorn University - Bangkok, Thailand*
- The Hague University - The Hague, The Netherlands*
- Amsterdam School of Business - Amsterdam, The Netherlands*
- University of Central Lancashire - Preston, United Kingdom*
- University of Hertfordshire - Hatfield, United Kingdom*



Please return this form to PB 189

For Office Use Only:

Proceed with application

Do Not Proceed with application

Comments: _____

Signature of Director