

APPLICATION FOR ADMISSION

Pacific States University
3424 Wilshire Blvd, Suite 1200, Los Angeles, CA 90010 USA | Phone: 1 (323) 731-2383 | Fax: 1 (323) 731-7276 | www.psuca.edu
Accredited by the Accrediting Council for Independent Colleges (ACCSC)
Accredited by the Bureau for Private Postsecondary Education (BPPE) of the State of California

Please be sure you have: 1) answered all que	Please be sure you have: 1) answered all questions completely; 2) enclosed the appropriate fees; 3) attached required academic documents; and 4) signed and dated this application.									
Admission Information										
Applying for Term (select one)							Year			
UNDERGRADUATE	☐ Fall	☐ Winter		Spring GRADUATE	□ Sun	nmer				
Bachelor of Business Administration		iness Administration		Master of Scie	nce					
Accounting	Accounting	1		Computer Science						
Computer in Business	Finance			☐ Information Systems						
Marketing		al Business					Diagon official two (2)			
	Real Estate Management						Please attach two (2)			
							passport photos he	ere		
Applicant Information (All required – please print clearly)										
Last Name (exactly as it appears on your passport)		First (Given) Name		Middle Name		e				
							1-			
Gender Male Female	Date of Birth	(mm/dd/yyyy)	C	ountry of Citize	nship		Country of Birth			
☐ Male ☐ Female US Social Security Number (if applicable	9)	Driver's License Nun	nhor (if s	annlicable)		Passport Nu	ımher			
US Social Security Number (if applicable)		Driver's License Number (if a		applicable)		i assport No	idilibei			
Permanent Address - Street (please en	ter your home c	ountry address if you ar	e an inte	ernational studen	t)					
City		State	ZIP/Postal Code			Country				
Current Mailing Address - Street (if diff	erent from abov	<u> </u>								
Carrott manning / taus coo Carrott (ii ann	0.0	- ,								
City		State ZIP/Postal Code			Country					
Home Telephone Number		Alternative Telephone Numb		per Email Addre		ess ess				
Applicant Status										
	V	1-	A	II O D			Otata of Decidence			
Are you a United States Citizen?	Yes ∐ N	10	Are you	ı a U.S. Permane	eni Reside	nt? res	s. State of Residency			
Will you need to apply for an F-1 Internati	sa?	Yes	3				☐ No			
Type of your current visa Date	nm/yyyy) Will you need to change your status to F-1 li				us to F-1 Inter	national Student? Yes	☐ No			
Will you be transferring from other univers					□No					
Last Date of Attendance (mm/dd/yyyy) If you are currently on OPT, please provide End Date (mm/dd/yyyy) Have you previously applied to Pacific States University? Have you attended to Pacific States University before?										
Yes, Applied for term	Yes, Date of Last Attenda			ance (mm/dd/	/yyyy)	☐ No				
No Listania										
Academic History Name of Institution	Full Address of	of Institution								
Name of institution	Tuli Addices c	i iiistitutioii								
Attendance Date From (mm/yyyy)	Attendance Da	ate To (mm/yyyy)	De	gree Awarded			Major Field			
Name of Institution	Full Address of	of Institution								
Attendance Date From (mm/yyyy)	Attendance Da	ate To (mm/yyyy)	De	gree Awarded			Major Field			
,	The state of the s			regree Awarded						
Name of Institution	Full Address of Institution									
Attendance Date From (mm/yyyy)	Attendance Da	ate To (mm/yyyy)	De	gree Awarded			Major Field			
Name of Institution	Full Address o	of Institution								
Tamo or mondition	Full Address of Institution									

Note: List in chronological order all secondary schools, colleges and universities you have attended or are attending, showing dates, diplomas, and degrees. Include every institution, regardless of length of attendance, even if no work was completed. Request each school to forward an official transcript to PACIFIC STATES UNIVERSITY. Include any past attendance at Pacific States University. All documents received become the property of Pacific States University.

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Dependent Information (for international applicant only)	English Proficiency								
Please refer to the Additional Requirements for bringing dependents and adjusting your Proof of Financial Support	TOEFL TOEIC IELTS GTEC CBT None								
Do you plan on bringing your spouse as a Dependent?	Test Date (mm/dd/yyyy)								
Do you plan on bringing your children as Dependents?	Score								
Voluntary Information Requested By Department Of Education, U.S.A.	☐ I do not wish to furnish this information								
Race/National Origin	Marital Status Single Married								
American Indian, Alaskan Native Black, Non-Hispanic White, Non-Hispanic Hispanic	☐ Divorced ☐ Widowed								
Asian, Pacific Islander African American Race / Ethnicity Unknown Non-Resident Alien	Physical Disability Yes No								
Referred to Pacific States University by									
PSU Alumni PSU Current Student Agent Website Newspaper / Magazine TV / Radio Other									
Please provide name or specify									
Application and Other Fees									
Application Fee (non-refundable, for all applicants) US\$50.00									
Program Registration Fee (non-refundable, for all applicants) One-Time US\$150.00									
Commitment Fee (applicable to tuition, for Transfer-In and Change of Status applicant only) U\$\$2,000.00									
Dependent(s) Document Processing Fee (non-refundable) U\$\$50.00									
Delivery Method (Select one of the following method to receive Acceptance Letter and Form I-20, non-refundable)									
☐ In-Person Pick-Up (Photo identification is required to pick up the document(s)) NO FEE									
U.S. first-class mail to U.S. addressee – no tracking number									
FedEx to U.S. addressee – recommended U\$\$25.00									
FedEx to international addressee – recommended.									
Delivery Instruction (Select one)									
I. Pick-up instructions – for in-person pick-up only II. Mailing instructions – for r	nail delivery only								
☐ I wish to pick up my document(s) by myself ☐ Mail to current mailing address as I printed on page 1.									
I wish to authorize the individual below to pick up my document(s) Mail to different mailing address below (P.O. Boxes is not accepted)									
Full Name (Last, First Middle) Mailing Label – Print name and address legibly									
Phone Number									
Email Address									
Payment Method (Select one)									
	al Check (payable to Pacific States University)								
Credit Card (Visa or MasterCard only) Credit Card Number:									
Expiration Date (mm/yyyy): CV Code (3 or 4 digit code on the back of credit card):									
Application will not be processed until all required fees are received. Tota	l Due US\$								
Certification	. 2 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5								
Pacific States University does not discriminate on the basis of race, color, age, religion, sex, national or ethnic origin,	marital status, physical disability, sexual orientation, or								
any other legally protected status in the administration of its educational programs, admission policies, or any other University-administered programs or activities. Inquiries concerning the application of Title IX of the Educational Amendment of 1972 and other non-discriminatory statutes should be directed to the Associate Dean, the University officer assigned the responsibility for reviewing such matters.									
I, the undersigned, acknowledge and agree with all the procedures and conditions of the admissions of Pacific States University. Additionally, I waive the right to inspect the campus before enrolling if I am not physically able to be present to inspect the campus. Furthermore, Pacific States University reserves the right to deny any application for admission. I acknowledge that the above application is correct in all respects; that I have not omitted the name of any school or college previously attended; and that, if admitted, I agree to observe all the rules and regulations of the Pacific States University.									
Applicant's Signature Required	Date Signed (mm/dd/yyyy)								
X									

REV02/06/2019 Page 2 of 2