

# University of Southern Maine

## International Student Exchange Application

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NAME \_\_\_\_\_  
(Last) (First) (Middle)

Please be sure to list your name EXACTLY as it appears on your passport.

CURRENT MAILING ADDRESS \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State)

\_\_\_\_\_  
(Zip)

Please note the last day that we can reach you at the address above: \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City, State)

\_\_\_\_\_  
(Zip)

E-MAIL ADDRESS \_\_\_\_\_ HOME PHONE \_\_\_\_\_

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_ DATE OF BIRTH (mm/dd/yyyy) \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

MARRIED OR SINGLE \_\_\_\_\_ COUNTRY OF CITIZENSHIP \_\_\_\_\_

COLLEGE/UNIV. IN WHICH YOU ARE ENROLLED \_\_\_\_\_

SEMESTER(S) YOU EXPECT TO STUDY AT U.S.M. \_\_\_\_\_

MAJOR AREA OF STUDY AT U.S.M. \_\_\_\_\_

NAME OF ADVISOR AT YOUR COLLEGE/UNIV. \_\_\_\_\_

ADVISORS ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

**PLEASE ATTACH SEPARATE SHEETS FOR THE FOLLOWING INFORMATION:**

1. Type a brief essay (300-500 words) stating your reasons for wanting to study at the University of Southern Maine. How will this period of study contribute to your program?

2. Please also enclose the following information with this form:

a. Statement from your advisor supporting your program of study at the University of Southern Maine.

b. TOEFL Score Report (*if required*) 550 minimum/213 CBT/79 internet or complete USM's Language Proficiency report (available online at: <http://usm.maine.edu/international/incoming-exchange> )

c. Certification of Finances documenting sufficient funds for your proposed period of study.

d. Academic transcript from your college or university listing courses you will have taken prior to your enrollment at U.S.M. (*This is extremely important as we must be able to verify that you have completed any necessary pre-requisites for upper level courses.*)

e. A copy of the biographical page of your passport.

**I certify, to the best of my knowledge, the information provided is correct.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Maine State Law requires all individuals born after December 31, 1956 who plan to enroll in a degree program or plan to take 12 or more credit hours, to show proof of immunity against measles, mumps, rubella, diphtheria, and tetanus before registering for classes. Additional information concerning this law will be sent to you upon acceptance of your application.

**Mail All Documents to:** Kimberly Sinclair, Interim Director  
University of Southern Maine, Office of International Exchange  
96 Falmouth Street, PO Box 9300  
Portland, ME 04104-9300 U.S.A.

Telephone: (207) 780-4959

FAX: (207) 780-4933

24 hour fax and answering machine

E-Mail: [ksinc@usm.maine.edu](mailto:ksinc@usm.maine.edu)