UMKC

Application for Admission to the Applied Language Institute

English as a Second Language, Undergraduate studies and English as a Second Language, Graduate and English as a Second Language

Name (Print your name clearly, exactly as it appears on your passport and/or legal documents.)

_____/ _____/ _____
Last (Family/Surname)   First   Middle

Term applying for: 20_____   Major _____

       ❍ Fall (August-December)   Degree _____
       ❍ Spring (January-May)
       ❍ Summer (June-July)   (For a list of degree programs, visit umkc.edu/isao/fyi)

Applying as:
❍ English as a Second Language (ESL)
❍ Undergraduate and ESL (both)
❍ Undergraduate and ESL transfer from another U.S. institution
    Graduate and ESL (both)
    Graduate and ESL transfer from another U.S. institution
    1+1 partner exchange program

Personal Data

Date of birth   __ __/ __ __ / __ __ __ __   City of birth _____   Country of birth _____   Gender   ❍ Male   ❍ Female
               Month   Day   Year

Country of citizenship _____   Country of legal permanent residence _____

Are you a Missouri resident?   Yes   No   If yes, how long? _____

If you are currently in the U.S., what type of visa do you hold? _____
What type of visa will you have while studying at UMKC? ❍ F-1   ❍ J-1   ❍ Other _____
What is your native language? _____
Have you previously applied to UMKC?   ❍ No   ❍ Yes   When? _____
Have you been enrolled at UMKC?   ❍ No   ❍ Yes   When? _____
         Have you ever been suspended, dismissed, expelled or subject to any disciplinary action for any reason (including academic dishonesty)
    at a college, university or other post-secondary academic institution?   ❍ No   ❍ Yes

Current Mailing Address   (Use U.S. mailing address only if you currently live in the U.S.)

_____
Street name and number
_____/ _____/ _____/ _____
City   State/Province   Country   Postal/ZIP code
_____/ _____
Telephone   Email

Permanent Address   (Required for I-20/DS-2019, regardless of current mailing address. No P.O. boxes allowed.)

_____
Street name and number
_____/ _____/ _____/ _____
City   State/Province   Country   Postal/ZIP code
_____/ _____
Telephone   Email