Masters of Business Preparation Program (MBPP) Application

PERSONAL: Please provide your personal information. Type or p	rint your name <u>exactly</u> as it appear	rs in your passport.		
Last/Family Name	First/Given Name		Middle Name	
☐ Male ☐ Female ☐ Date of Birth (Month, Day, Year)	Country of Birth		Country of Citizenship	
Home Country Address	City	Province	Postal Code	
Country	Telephone Number (include are	ea code)	Email	
 Have you applied to one of our programs before? Yes Is your mailing address the same as your home country address 			ease provide:	
Mailing Street Address	City	Province	Postal Code	
Country	Telephone Number (include are	ea code)		
3. What is your highest level of study completed? High School University				
PROGRAM: Please tell us when you plan to attend.				
Select Your Start Date: September 2018 September 2 Select Your Concentration: MBA Finance Accounting Will you attend Intensive English before MBPP? Yes If yes, please choose your program start date: January	019 □ No □ April □ July			
PARTNER AGENCY: Are you sponsored by and agency/embassy/	partner university? Yes N	lo If NO, skip to ir	mmigration. If YES, please provide:	
Name of Agency, Embassy, or Partner University	Agency	/ ID #	Country	
Mailing Street Address Optional: If you want to authorize us to release your personal/f	City inancial records to your agent/rep	For more information on student record privacy,		
Student Signature	Date	see http://www.cnc.ucr.edu/sais/privacy.html.		
IMMIGRATION: Do you need an I-20? Yes No If YES, you MUST attach a bank letter (see Application Process to determine the required amount for your bank letter, including dependents you wish to bring).				
NOTE: You <u>must</u> attach copies of your passport info page, and the same for any dependents who will accompany you. 1. Are you financially sponsored by an agency, company or embassy? No If YES, you MUST attach a letter of sponsorship on the organization's letterhead. If NO, skip to #2. 2. Are you transferring from another U.S. institution? No If NO, skip to #3. If YES, please provide:				
Name & Address of Current School NOTE: You <u>must</u> attach copies of all your I-20s from other sch 3. This Statement of Financial Support must be signed by the posign it: "I have read the information regarding the cost of tuit I certify these funds are available and I accept full responsible."	erson who is financially responsible tion and living expenses for the pe	card and your F-1 versions of the contract of	financially responsible for yourself, you must	
Name of Person/Organization Financially Responsible	Relationship to Student	Signature	Date	
PAYMENT: Pay your application fees with a cashier's check/mo	ney order made payable to "UC Re	gents" or by Visa or l	MasterCard.	
Credit Card Number Cardholder's Name	Expiration Date	3-Digit Security	Code Authorizing Signature	
I authorize UCR to charge: \$200 Enrollment Application For OR Money Order or Cashier's Check enclosed	ee 🗆 \$200 Housing Placement I	Fee Other:		
REQUIRED: "I certify the information on this entire form is cor				
of my knowledge."	Signature		Date	

Please mail, fax, or email your application materials to: International Education Programs, UC Riverside Extension, 1200 University Ave., Riverside, CA 92507-4596, U.S.A. / Phone: (1-951) 827-4346 / Fax (1-951) 827-5796 / Email: iepapplication@ucx.ucr.edu