



Exchange Student Program
Exchange Student Application Form

Please complete the form in English answering all questions. Type or print neatly in ink.

Full Name (as it appears on your passport)

Surname Given Names

Permanent address in home country City

Date of Birth: _____ **Telephone:** _____
Month Day Year

Country of birth: _____ **Country of citizenship:** _____

City of birth: _____ **Email address:** _____

Home University:

Exchange coordinator at home university:

Month of arrival at SWOSU: January June August **Year:** _____

Expected duration of stay: 1 semester 2 semesters 3 semesters

Field of study at SWOSU: _____

I confirm that I have provided my complete academic credentials to SWOSU. I understand that withholding information requested in the application process, including the online application, or giving false information may make me ineligible for admission to SWOSU or continued attendance at SWOSU.

Applicant's signature (required)

Date (month/day/year)

IMPORTANT: You must upload this section of the form with your completed Exchange Student Program Certification of Financial Resources form and current sponsor bank statement to the SWOSU Dropbox.

To submit all required documents at one time --click on the following link to upload them
<https://www.dropbox.com/request/VGHim3EyXJgVeUDtffwX>



Exchange Student Program

Certification of Financial Resources

If you are accepted to participate in this exchange program with SWOSU, you will not be charged tuition by SWOSU as a participant. However, you will need to pay other expenses. For *each semester* we ***estimate*** these expenses to be:

EXPENSE	COST
*Mandatory Fees (Estimated enrollment of 15 hours)	\$ 960.00
**Room and Board (Dormitory)	\$2,790.00
Books and Supplies	\$ 650.00
Personal Expenses (Clothing, Personal Needs, Medicine, Etc.)	\$1,000.00
Medical Insurance	\$ 400.00
TOTAL	\$5,800.00

- *Mandatory fees will increase if the student enrolls in more than 15 hours
- **The Room and Board amount is based on a Semi-private room with 19 meals per week.

This is to certify that I will assume full financial responsibility (\$5,800.00 US Currency for each semester) for the support of (student's name) _____ during the course of his/her studies as an exchange student at Southwestern Oklahoma State University.

DATE FINANCIAL SPONSOR'S HAND-WRITTEN SIGNATURE

PRINT OR TYPE FULL NAME OF SPONSOR: _____

SPONSOR'S RELATIONSHIP TO STUDENT: _____

SPONSOR'S ADDRESS _____

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A current bank statement for the sponsor should be uploaded also.