



2083 Lawrenceville Road  
Lawrenceville, NJ 08648-3099 USA  
Fax: +1-609-895-5680  
Email: [global@rider.edu](mailto:global@rider.edu)

### Application for XISU-Rider Program Admission

#### **How To Apply**

To apply for admission, please submit all of the following:

1. Completed application for admission
2. Official transcripts from XISU, in English
3. Proof of English proficiency (at least TOEFL iBT 80 or IELTS 6.5)
4. Copy of passport
5. International Student Supplement (*waived if a letter of support is provided*)
6. Supporting financial documentation (required, example: bank statement)

Forms and documentation should indicate funding for living expenses, books and supplies, and personal expenses as described on the International Student Supplement. If you will be attending for one semester only, please provide documentation for one-half the total cost.

<b><u>Level</u></b>	<b><u>Campus</u></b>	<b><u>Housing</u></b>	<b><u>Standing</u></b>	<b><u>Program</u></b>
<input checked="" type="checkbox"/> Undergraduate	<input checked="" type="checkbox"/> Lawrenceville	<input checked="" type="checkbox"/> On-campus	<input checked="" type="checkbox"/> Non-matriculating	<input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2 <input type="checkbox"/> Option 3

#### **Term(s) of Study (check one or both):**

- Fall 20\_\_\_\_ (September – December)       Spring 20\_\_\_\_ (January – May)

**Name (as on passport):** \_\_\_\_\_

*First Name*

*Middle Name*

*Last Name*

**Foreign Mailing Address (permanent address):**  
\_\_\_\_\_  
\_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email address:** \_\_\_\_\_

**Gender:**     Male             Female

**Date of Birth:** \_\_\_\_\_  
*(month/date/year)*

**Country of Birth:** \_\_\_\_\_

**City of Birth:** \_\_\_\_\_

**Country of Citizenship:** \_\_\_\_\_

**Visa Type:**  **F-1 Student Visa**

**Country of Legal Permanent Residence:** \_\_\_\_\_

**Institution currently attended and current major:** \_\_\_\_\_

**Program of interest at Rider University:** \_\_\_\_\_

*Signature of Student*

*Date*