

## EXCHANGE STUDENT APPLICATION INSTRUCTIONS

To apply to Baruch College as an Exchange Student, please follow the procedure exactly as outlined below. (The better you follow the instructions, the fewer mistakes you will make, and the sooner you will get through the application process and receive your DS-2019, the document you will need to get your visa.)

### **IMPORTANT NOTE FOR FALL 2023:**

**Due to the COVID-19 pandemic, we will be accepting scanned copies of your original documents. HOWEVER, it is IMPERATIVE that you keep ALL of your ORIGINAL DOCUMENTS together, as you will need them for your visa appointment at your local U.S. Consulate.**

### **EXTREMELY IMPORTANT:**

There will be a MANDATORY Welcome Event before the semester begins. The TENTATIVE date is Wednesday, August 23<sup>rd</sup>, 2023. You will be required to attend this event, and the arrival date on your DS-2019 will take this into account. This is also important for you to know because you may not enter the U.S. after the date on your DS-2019.

**Therefore, before purchasing your plane tickets, you should be sure that you have confirmation from us of all the above-referenced information!**

### **Nomination for the Exchange Program**

You must be officially nominated by your university to apply to study at Baruch as an exchange student. If you are not sure that this has been done, please contact your International Office – the deadlines are below.

### **DEADLINES:**

	<b><u>for fall semester</u></b>	<b><u>for spring semester</u></b>
<b>Nomination</b> (by home institution)	March 15 <sup>th</sup>	October 1 <sup>st</sup>
<b>Part I</b>	April 1 <sup>st</sup>	October 8 <sup>th</sup>
<b>Part II</b> (EXCEPT Certification of Insurance)	April 15 <sup>th</sup>	October 15 <sup>th</sup>
<b>Certification and proof of insurance</b>	July 15 <sup>th</sup>	December 1 <sup>st</sup>

*(The above deadlines are Baruch's deadlines, and may not be the same as your home institution's.)*

**ALL OF YOUR DOCUMENTS MUST BE SUBMITTED TO US THROUGH OUR SECURE DROP BOX – please follow the instructions below and label the documents as indicated:**

- Go to [https://baruch.cuny.edu/secure\\_drop](https://baruch.cuny.edu/secure_drop)
- Create an identity and provide an email address
- **Label** each document with **your name (LAST First) and the name of the form** (Part I/transcript/current courses/passport/health insurance verification/immunization record/proof of vaccination)
- Upload all documents to be sent to us (PDF form ONLY; NO photographs will be accepted)
- **Send an email** to [study.abroadxc@baruch.cuny.edu](mailto:study.abroadxc@baruch.cuny.edu) to let us know what you sent so that we can be sure everything was received. (Do NOT attach the documents to the email.)

### **To do NOW:**

The first thing you must do is to submit a **high-resolution, scanned, color copy of your passport** (the one you will use to travel to the U.S.). This should be submitted to us through the **secure drop box** (see instructions above). We need this for initial registration purposes.

*(If you have a U.S. passport, please use it.)*

**NOTE:** The expiration date on your passport must be at least 6 months after the date you will return home. (If it is not, please renew your passport immediately and send us a scanned copy of the one you currently have in the meantime.)

### **Part I: Academics/Immunization/Insurance Verification**

Please now complete Part I of the application, a fillable pdf file, and submit it to us through the secure drop box. In order to avoid mistakes that will delay the processing of your application, please follow the instructions very carefully. We have included screenshots to guide you through the process.

**PLEASE NOTE:** The summarized information in this document does **NOT** replace the information on our [website](#), so please be sure to consult the more detailed information that you will find there, along with the application forms.

*You can access the Part I documents [here](#).*

*The documents to be submitted are listed in the checklist below – please check them off as you complete them to be sure that you do not miss anything.*

You must upload **scanned** copies of your documents to us through the **drop box**. Documents will **ONLY** be accepted in **pdf format**.

#### **Personal Information** (pages 1-2 of Part I)

Please complete this first section of Part I very carefully and be sure to enter your name **exactly** as it is written in **your passport**. **All** of these fields must be completed.

(If you have dual citizenship, one of which is U.S. citizenship, please use the U.S. one for your application, and to enter the U.S.)

PERSONAL INFORMATION (Be sure to complete all required fields, and any other fields that apply to you.)			
Last Name:	<input type="text"/>	Gender (on passport):	<input type="checkbox"/> Female <input type="checkbox"/> Male
First Name:	<input type="text"/>	Country of Birth:	<input type="text"/>
Middle Name(s):	<input type="text"/>	City of Birth:	<input type="text"/>
Date of Birth:	Month <input type="text"/> <input type="text"/>	Country of Citizenship:*	<input type="text"/>
	Day <input type="text"/> <input type="text"/>		
	Year <input type="text"/>		
*If you are a citizen of more than one country, please list the country whose passport you will submit for your J-1 Visa			

Complete this next section with your **permanent** mailing address.

Enter both your personal email and your university-assigned email addresses. (Do NOT use a “Hotmail” address, since we often have problems sending to, and receiving from, Hotmail addresses.)

All fields must be completed (unless they are not applicable). **Your mailing address must be your permanent one** – where we could send (postal) mail November – January.

Mailing address to which you wish all official correspondence to be sent:			
Number and Street:	<input type="text"/>	Apartment number:	<input type="text"/>
City:	<input type="text"/>	Country:	<input type="text"/>
		Postal Code:	<input type="text"/>
Preferred telephone number:	<input type="text"/>	Alternative telephone number:	<input type="text"/>
E-mail address:	<input type="text"/>		

**Academic Information** (page 2 of Part I)

In this section, “Academic Information,” check each semester that you will be attending Baruch, and select the year that applies to the semester.

The “**Name of Institution attended**,” as mentioned in the instructions on our website, should be ONLY universities, in other words, post-secondary, those **AFTER** the equivalent of high school/Baccalaureat/Abitur/Matura/Selectividad, etc. (Be sure to complete all applicable fields.)

**ACADEMIC INFORMATION**

Home Institution:

Proposed term of study at Baruch College: (Please check all that apply)  Fall Semester  Spring semester Year  Year

Major concentration at home university:

Academic level of courses you wish to take at Baruch College: (Please re-read [online instructions](#) before checking this box)  Undergraduate  Graduate

Please list below all post-secondary schools attended (beyond the equivalent of U.S. high school), and whether or not you completed a degree. **Include the institution you are currently attending.** You must also provide an **official transcript or equivalent record** from every institution you have attended. Your application will not be considered until we receive these transcripts.

Name of Institution attended	Dates attended (MM/YY):		Diploma or Degree obtained	Date Awarded (MM/YY)
	from	to		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Please be sure to fill out all the requested information about your **level of English proficiency.**

English Language Preparation (self-assessment):

*Reading proficiency*  Excellent  Good  Fair *Writing proficiency*  Excellent  Good  Fair *Speaking proficiency*  Excellent  Good  Fair

TOEFL Score (if available)  (a score of 90 on the Internet-based TOEFL is recommended)

Other English-language certification:

If you have taken courses at your home institution or at other universities that were taught entirely in English, please list the number of university credits you earned while enrolled in courses taught entirely in English:

Academic institution(s) where you took courses taught in English	Number of Courses taken	Total number of credits earned
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

What is requested in the **Statement of Purpose** should be self-explanatory. Follow the guidelines that are given to be sure you are providing the information requested.

**Statement of Purpose**

Below please describe your reasons for wishing to attend Baruch College on the exchange program. A good way to organize your statement is to list up to four specific objectives you would like to achieve through studying for a semester or year at Baruch, and explain how you will do this. Also address such issues as how you might integrate this study abroad experience into your further academic career, and into your career plans after graduation.

**BEFORE BEGINNING THE NEXT SECTION**, please see the [Exchange Student Resources](#) page on the Weissman Center Study Abroad website for detailed information concerning courses, classes, student status, academics, and U.S. academic culture.

**Exchange Student Course Request Form** (pages 3-4 of Part I)

- Be sure to include your full name at the top of page 3 in the space provided.

<b>Exchange Student Course Request Form (p. I)</b>			
Name:	<input style="width: 95%;" type="text"/>	<input style="width: 95%;" type="text"/>	Baruch Empl ID: <input style="width: 95%;" type="text"/>
	Surname/Family Name	Given Name/First Name	(Study Abroad Office use only)

- Fill in the **semester**, **year**, and **student status** just under the example of ECO 3100.

	Dept.	Number	Course Title	Credits	Preferred Class(es)						
1	ECO	3100	Intermediate Micro-Economics	3	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">1.</td> <td style="text-align: center;">56657</td> </tr> <tr> <td style="text-align: center;">2.</td> <td style="text-align: center;">58884</td> </tr> <tr> <td style="text-align: center;">3.</td> <td style="text-align: center;">56649</td> </tr> </table>	1.	56657	2.	58884	3.	56649
1.	56657										
2.	58884										
3.	56649										
Semester: <input type="checkbox"/> Fall <input type="checkbox"/> Spring    Year: 20 <input type="checkbox"/> Student Status: <input type="checkbox"/> Undergraduate <input type="checkbox"/> Graduate											

- You **MUST** fill in **12 courses** (even though undergraduates will only take 4 or 5 and graduate students will only take 4). Be sure to also include the class numbers in the column on the right. *(Follow the example provided for ECO 3100).* IF you are attending for two semesters, please only select courses for the first one.

*(You will not necessarily be approved for all your choices.)*

- You will use the [CUNYfirst Global Search – Class Schedule](#) to find the courses being offered. It is **VERY IMPORTANT** to follow the instructions on our website and the steps below to avoid selecting the wrong courses.
- **PLEASE NOTE:** If the course list for the semester that you will be here is not yet available, use the list for the semester currently in progress. You

should then keep checking the website so that when the new schedule comes out, you can verify that the classes you selected are actually being offered and see if there are others that interest you.

**After being taken to the “CUNYfirst Global Search – Class Schedule” page, complete it as follows:**

- 1) **INSTITUTION:** Select “Baruch College”
- 2) **TERM:** Select the first term you will attend (*if that term is not yet available, please use the current one – you will make the necessary adjustments to your selection when the fall schedule becomes available*)

### Enter Search Criteria

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#### Search for Classes

**Institution**

Select All Institutions

<input checked="" type="checkbox"/> Baruch College	<input type="checkbox"/> Lehman College
<input type="checkbox"/> Borough of Manhattan CC	<input type="checkbox"/> Macaulay Honors College
<input type="checkbox"/> Bronx CC	<input type="checkbox"/> Medgar Evers College
<input type="checkbox"/> Brooklyn College	<input type="checkbox"/> NYC College of Technology
<input type="checkbox"/> City College	<input type="checkbox"/> Queens College
<input type="checkbox"/> College of Staten Island	<input type="checkbox"/> Queensborough CC
<input type="checkbox"/> Graduate Center	<input type="checkbox"/> School of Journalism
<input type="checkbox"/> Guttman CC	<input type="checkbox"/> School of Labor&Urban Studies
<input type="checkbox"/> Hostos CC	<input type="checkbox"/> School of Law
<input type="checkbox"/> Hunter College	<input type="checkbox"/> School of Medicine
<input type="checkbox"/> John Jay College	<input type="checkbox"/> School of Professional Studies
<input type="checkbox"/> Kingsborough CC	<input type="checkbox"/> School of Public Health
<input type="checkbox"/> LaGuardia CC	<input type="checkbox"/> York College

**Term**

2023 Fall Term ▾

**(Click “NEXT” to go to the next page)**

- 3) **SUBJECT:** Use the drop-down menu to select the subject of the courses you would like to look at.

- 4) **COURSE CAREER**: Use the drop-down menu to select whether you are an undergraduate or a graduate student.
- 5) **COURSE ATTRIBUTE**: Please do NOT fill anything in here.
- 6) **COURSE ATTRIBUTE VALUE**: Please do NOT fill anything in here.
- 7) **Check the box for “Show Open Classes Only.”**
- 8) **SESSION**: Please do NOT fill anything in here.
- 9) **MODE OF INSTRUCTION**: Check “In-Person” to see if the courses that you need/want to take are offered in-person.

*Due to the current situation caused by the COVID-19 pandemic, IF you do not find in-person classes of courses that you need, you may then go back and select both “Hybrid” and “In-Person” to see if there are sections which are “hybrid” (partially in-person, partially online). If this is the case and the courses are ones that you need for your degree, you must request additional permission by providing us with an explanation as to why it is necessary for you to take this hybrid course. This will need to be backed up by an email from your home institution. (In non-COVID times, exchange students are only permitted to take in-person classes.)*

### Enter Search Criteria

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Search for Classes

Baruch College | 2021 Fall Term

Select at least 2 search criteria. Select Search to view your search results.

<b>Subject</b>	Marketing
<b>Course Career</b>	Undergraduate
<b>Course Attribute</b>	
<b>Course Attribute Value</b>	
<b>Requirement Designation</b>	
	<input checked="" type="checkbox"/> <b>Show Open Classes Only</b>
<b>Session</b>	
<b>Mode of Instruction</b>	<input type="checkbox"/> Hybrid <input checked="" type="checkbox"/> In Person <input type="checkbox"/> Online

▶ **Additional Search Criteria**

BACK
CLEAR
SEARCH

**(Click “SEARCH” to see a list of the classes offered.)**

- **Please note:**
  - Graduate students may only select 9000-level courses.
  - Undergraduate students may not select 9000-level courses.
  - Exchange students are **NOT** permitted to take courses that are:
    - ◇ 5000-level
    - ◇ “H” (honors)
    - ◇ Fully online classes
    - ◇ Foreign language courses
  
- You must respect the **prerequisites** and **co-requisites**, if there are any listed.
 

**Prerequisites** are courses that must be taken before the course you want to take. For you, as an exchange student, your **previous and current coursework** will fulfill these requirements IF the material covered in your classes was similar enough to the material covered in the prerequisite course(s). Please look at the course descriptions for the courses that are listed as prerequisites to determine whether you have already studied, or are currently studying, the same material. **You will find the pre-/co-requisite listings by clicking on the class number.**
- Keep in mind that you **must** receive Baruch’s approval for all courses that you take – whether you are attending for one semester or for two.

**Previous and Current Coursework in Selected Disciplines** (pages 5-8 of Part I)

- ALL of the courses you have taken (in your degree program) should be filled in on these pages, to help the Baruch faculty determine your eligibility to take the courses you have selected.
- Please be sure to also fill in the page for the courses you are **currently** enrolled in, or that you will have taken before your arrival at Baruch.
- Do **NOT** forget to check whether the courses were/are undergraduate or graduate-level, and to enter the grade you received.

**Certification of Application** (page 8 of Part I)

- Be sure to read and then check the appropriate boxes.
- Sign and date the form (date should be MM/DD/YYYY).



**Certification of Application (please read carefully and, when finished, sign with a digital signature)**

Please read the following and certify by checking the box that you have completed each of the actions listed below. You must check every box before signing and submitting the Application. Please note: **Failure to submit the required documents in a timely manner will make it impossible to process your matriculation and registration, and may result in the denial of your application to study as an exchange student at Baruch College.**

- I certify that I have made **scanned photocopies of my transcript(s) from all institutions of higher (tertiary) education** (i.e., any institution that awards a bachelor's degree or higher) **and a translation into English** of any transcript that is not already in English.
- I certify further that I will **add the scanned copies of my transcript(s) and any required translation(s)** to the same PDF file I submit as Part I of the Baruch College Exchange Student Application, or submit these files at the same time, using the secure document drop-box.
- I certify that I will also attach a scanned high-resolution color photocopy of the identification page(s) of my passport and submit it using the secure document drop-box.
- I certify that the information submitted on this application is accurate to the best of my knowledge. I understand that withholding information or misrepresenting my record may result in denial of my application or withdrawal of any approval granted to study at Baruch College as an exchange student. I understand further that the information provided in my application will be treated confidentially and will be used for institutional purposes only.

Student Signature:	<input type="text"/>	Date:	<input type="text"/>
	Unsigned signature field (Click to sign)		MM/DD/YYYY

**Copy of transcript(s)** (include transcripts for all universities attended)

**Copy of passport** – high-resolution, scanned, color copy (*this should have already been uploaded to the drop box*).

**Health Insurance Verification form** (*be sure to sign and date this form*)

**Immunization Record form** (two pages)

*We realize that you may need a little time to get your healthcare provider's signature, or even to get vaccinations that you have not had, but the sooner you submit this information to us, the easier it will be to get you enrolled in courses and fully registered.*

- Be sure to fill in your name and whether you are an undergraduate or graduate student at the top of the page.
- Leave "EMPL ID #" blank.
- You **MUST** have had 2 vaccinations for measles, or 2 MMR vaccines. Otherwise, you must submit a blood titer showing immunity. (One vaccination each for mumps and rubella is sufficient if you have had your vaccinations separately.)
- The **healthcare provider** MUST fill out, sign, and stamp the bottom of the first page (2-B).

Part 2: Immunization History				-- To be completed by a health care provider -- *Documentation must be included*		
<b>Provider: All dates must include month, day, and year. Please mark an (X) in the appropriate boxes</b>						
A.	Measles, mumps and rubella must be live vaccine and given no more than 4 days prior to first birthday.			month	day	year
	MMR (measles, mumps, rubella) – if given as combined dose instead of individual vaccine.					
	<input type="checkbox"/> Dose 1: No more than 4 days prior to first birthday, AND on or after April 23, 1971					
	<input type="checkbox"/> Dose 2: At least 28 days after 1 <sup>st</sup> vaccine					
O R	<input type="checkbox"/> Measles (Rubeola) Dose 1: Immunized on or after Jan. 1, 1968 and first birthday AND					
	<input type="checkbox"/> Measles (Rubeola) Dose 2: Immunized at least 28 days after the first dose					
	<input type="checkbox"/> Rubella Immunized after 1969 and on or after first birthday					
	<input type="checkbox"/> Mumps Immunized after 1968 and on or after first birthday					
O R	Titer (blood test) showing positive immunity (Dated lab results MUST be attached)			month	day	year
	<input type="checkbox"/> Measles					
	<input type="checkbox"/> Mumps					
	<input type="checkbox"/> Rubella					
B.	Health care provider information: (Please include official stamp)					
	Name: _____ Address: _____					
	Signature: _____ License #: _____ Phone :( ) _____					

- Do not forget to submit the second page which concerns meningococcal meningitis. Remember to fill in your name at the top, check the one box that applies to your case, and then sign and date the form at the bottom of the page (date should be MM/DD/YYYY).
- Please upload this form to the drop box (do **NOT** send it to Medical Records).

Part 3: Meningococcal Meningitis		To be completed by the student	
<b>Instructions: Please check one box in Section A below and sign and date in Section B</b>			
A.	I have (for students under the age of 18: My child has):		
	<input type="checkbox"/> had meningococcal immunization within the past 5 years. The vaccine record is attached.		
	[Note: The Advisory Committee on Immunization Practices recommends that all first-year college students up to age 21 years should have at least 1 dose of Meningococcal ACWY vaccine not more than 5 years before enrollment, preferably on or after their 16th birthday, and that young adults aged 16 through 23 years may choose to receive the Meningococcal B vaccine series. College and university students should discuss the Meningococcal B vaccine with a healthcare provider.]		
	<input type="checkbox"/> read, or have had explained to me, the information regarding meningococcal disease. I (my child) will obtain immunization against meningococcal disease within 30 days from my private health care provider.		
	<input type="checkbox"/> read, or have had explained to me, the information regarding meningococcal disease. I understand the risks of not receiving the vaccine. I have decided that I (my child) will not obtain immunization against meningococcal disease.		
B.	Student/ Parent Signature if student is under 18 years. _____		_____/_____/_____ mm dd yyyy

**Vaccination record/card** (a scanned copy of your health card, record, or certificate).

**Proof of COVID-19 vaccinations** (scanned copies)

Any and all proof of your COVID-19 vaccination(s). If you had a vaccine that includes **two doses, we must receive proof of EACH dose, and the date you received it. We also need proof of your booster. (You MUST be vaccinated to attend Baruch College.)**

**(SEE NEXT PAGE FOR PART II INSTRUCTIONS)**

## Part II – Visa and Finances/Insurance Certification

You can access the Part II documents [here](#).

Your next step is to complete the **Confidential Declaration and Certificate of Finance** form and obtain the proper financial documents.

These are the documents that will enable us to issue a DS-2019 for you. Your DS-2019 is necessary to apply for a visa.

It is therefore extremely important that these documents be correctly completed, that the amount of demonstrated funding meets or exceeds the minimum amounts required, and that you provide ALL the documents requested.

**Financial documents should be issued no earlier than March 15<sup>th</sup> for fall semester applications, or September 1<sup>st</sup> for spring semester applications.**

*(They must not be more than 90 days old at the time of processing by Baruch.)*

Copies of these documents should be sent to us through the secure drop box (do **NOT** send them by email). We will check to be sure they have been correctly completed and contact you if there are any modifications to be made.

*Please use the checklist below to be sure that you do not leave anything out.*

### Confidential Declaration and Certificate of Finance

- The box at the top right corner labeled “For ISSC Office Use Only” should be left blank (p.1)
- “Personal Information” (pp. 1-2)
  - “Home address” must be complete and must be your permanent one.
  - “Name” (exactly as in your passport)
  - “Home university” is the one you currently attend (p.1)
  - “Marital Status” – Please be sure to check one of the two boxes (p.2)

PERSONAL INFORMATION (continued)	
MARITAL STATUS:	<input type="checkbox"/> Single <input type="checkbox"/> Married

- “Current U.S. Immigration Status” (p.2) – check one of the two boxes

CURRENT U.S. IMMIGRATION STATUS	
Do you currently have any type of non-immigrant visa issued by the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered yes, what non-immigrant visa do you have?	
If you answered yes, what was the date you entered the U.S. on this visa?	
If you answered yes, on what date does your visa status end?	

- **“Sources of Funds”** (p.4)
  - **The funds for which you must show proof are:**
    - \$14,741 for one semester
    - \$29,483 for the academic year
  - Be sure to fill in your full name at the top of the page.
  - **“Personal Savings”** – this refers to your personal savings
  - **“Sponsor’s Savings and Other Resources”** – this refers to money for your semester that will be provided by someone else (such as a family member). If you have a sponsor, the sponsor’s name, signature, date, and relationship to you must be filled in on page 5, and the “Affidavit of Personal Sponsorship” (page 6) must be completed.
  - **“Government Funding”** – fill in only if you are receiving money from your government for your semester abroad. (A letter of proof must be provided.)
  - **“Living Expenses/Room and Board”** – complete only if you will be receiving room and board from a friend or relative. (A letter from the person must be provided.)
  - **TOTAL (A+B+C+D+E)** – this field **MUST** be filled in.
  - **“Final Certifications”** (p.5) – check all the boxes, then **print your name, and sign and date** this form on the appropriate lines. If you have a sponsor, then your sponsor must also print his/her name, address, relationship to you, and then sign and date this form. Be sure that the addresses you fill in are complete addresses (as on an envelope being sent by postal mail). ***(This/these must be official digital or original handwritten signature(s), in blue ink if handwritten.)***

#### FINAL CERTIFICATION(S)

PLEASE READ THE FOLLOWING, CHECK THE BOXES, FILL IN, SIGN AND DATE IN THE APPROPRIATE FIELD(S)


- By signing below, I (or we, if applicable) hereby certify that the above information is accurate and that I am/ we are aware of the full cost of education at Baruch College as outlined in the table on **page 3** of this form.
- I/We have completed the Affidavit(s) of Personal Sponsorship, if required.
- I/We have further provided original documents to support the entries made on the table on **page 4**, and on the Affidavit(s) of Personal Sponsorship, if applicable.
- I/We certify that the funds listed on **page 4** are available and will be accessible and provided to the student for the entire period of study.

Student's name (please print)	Student's signature (digital or by hand, in blue ink)	Date (MM/DD/YY)
1 <sup>st</sup> Sponsor's name (if applicable) (please print)	1 <sup>st</sup> Sponsor's signature (digital or by hand, in blue ink)	Date (MM/DD/YY)
1 <sup>st</sup> Sponsor's address 1 (street, house number, etc.)	1 <sup>st</sup> Sponsor's relationship to student	
1 <sup>st</sup> Sponsor's address 2 (city, postal code, country)		
2 <sup>nd</sup> Sponsor's name (if applicable) (please print)	2 <sup>nd</sup> Sponsor's signature (digital or by hand, in blue ink)	Date (MM/DD/YY)
2 <sup>nd</sup> Sponsor's address 1 (street, house number, etc.)	2 <sup>nd</sup> Sponsor's relationship to student	
2 <sup>nd</sup> Sponsor's address 2 (city, postal code, country)		

**Affidavit of Personal Sponsorship** (page 6)

Please have this form completed **only** if the source of any funding for your expenses during your stay is a family member, relative, or friend.

- The first section is for your SPONSOR's information.

		<b>AFFIDAVIT OF PERSONAL SPONSORSHIP</b>	
<small>(Please have this form completed <b>only</b> if the source of any funding for your expenses during your stay is a family member or friend.)</small>			
<b>SPONSOR INFORMATION</b>			
Please enter your name <b>exactly</b> as it appears in your passport:			
<b>NAME:</b>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<small>Last (Family) Name</small>	<small>First (Given) Name</small>	<small>Middle Name(s)</small>
			<b>GENDER:</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
<b>HOME ADDRESS 1:</b>	<input type="text"/>	<b>COUNTRY:</b>	<input type="text"/>
<b>HOME ADDRESS 2:</b>	<input type="text"/>	<b>POST CODE:</b>	<input type="text"/>
<b>CITY:</b>	<input type="text"/>	<b>PHONE NUMBER:</b>	<input type="text"/>
<b>DATE OF BIRTH:</b>	Month <input type="text"/> Day <input type="text"/> Year <input type="text"/>	<b>EMAIL ADDRESS:</b>	<input type="text"/>



- The second section must be filled in with the student's name, the semester and year, and the financial information concerning the amount the sponsor is providing for your time at Baruch College.

<b>CERTIFICATION OF SPONSORSHIP</b>	
I hereby certify that I am able, willing and do commit to provide <input type="text"/>	
<small>(Name of <u>exchange student</u> you are sponsoring)</small>	
who will be participating in the exchange program with Baruch College during the	<input type="checkbox"/> Fall semester 20__ <input type="checkbox"/> Spring semester 20__ <small>(check all that apply)</small>
With the amount of \$US <input type="text"/>	<input type="text"/>
<small>(in numbers)</small>	<small>(Amount written in words)</small>
I currently have \$US <input type="text"/>	<input type="text"/>
<small>(in numbers)</small>	<small>(Amount written in words)</small>
in my account with <input type="text"/>	<input type="text"/>
<small>(Name of bank)</small>	<small>(Address of bank)</small>
<input type="text"/>	<input type="text"/>
<small>City</small>	<small>Country</small>
<input type="checkbox"/> I have attached a bank letter or bank statement(s) issued within the past 90 days, validated by a bank officer and translated into English if not already in English.	
<input type="checkbox"/> I certify that the information given above is accurate to the best of my knowledge. I agree to inform the International Student Service Center at Baruch College of any changes to my legal or financial situation that could affect my ability to fulfill my obligations as sponsor for the above-named student	
<input type="text"/>	<input type="text"/>
<small>Signature (digital or by hand, in blue ink)</small>	<small>Date (MM/DD/YY)</small>

- The last section must have BOTH boxes checked and be signed and dated by the SPONSOR.

I have attached a bank letter or bank statement(s) issued within the past 90 days, validated by a bank officer and translated into English if not already in English.

I certify that the information given above is accurate to the best of my knowledge. I agree to inform the International Student Service Center at Baruch College of any changes to my legal or financial situation that could affect my ability to fulfill my obligations as sponsor for the above-named student

Signature  
(digital or by hand, in blue ink)

Date  
(MM/DD/YY)

**Note:**

As mentioned previously, scanned copies of the *Confidential Declaration and Certificate of Finance*, the *Affidavit of Sponsorship* (if applicable), and *all other financial documents* should be uploaded to the secure drop box.

The forms concerning your insurance may be sent to us (through the secure drop box) **AFTER** you have received your visa. (You should wait until then to purchase your insurance.)

**Certification of Insurance Coverage form**

- Be sure to fill in your last name, first name, home university, and semester(s) and year(s) attending Baruch.
- “**Dates of Program on DS-2019**” should be the dates on your DS-2019 (Item 3 on the DS-2019).
- “**Insurance Policy Information**” – please be sure to complete this.
- “**Dates of enrollment**” should be the beginning and end dates of your **actual policy**, which must begin no later than the date of Orientation, and end no earlier than the last day that you will be in the U.S. (These dates will usually differ from the “Dates of Program.”)

**Insurance Policy Information:**  
Please complete the following information. You are required to attach a photocopy of the receipt of the policy you purchased and a summary of benefits that shows that the policy provides the required coverage.

Insurance company name:

Insurance company address:

Policy number:

Dates of enrollment: From: Month  Day  Year  To: Month  Day  Year



- Remember to sign and date the form at the bottom.

Please read, sign, and date, and return a signed copy to the Baruch Study Abroad Office:

I hereby certify that I have obtained health and accident insurance coverage for myself and for any dependents traveling with me for the entire period I will be in the United States under the auspices of the J-1 Exchange Visitor Program at Baruch College.

Exchange Student Signature  
(digital or by hand, in BLUE ink)

Date  
(MM/DD/YY)

**Proof of Insurance Coverage** *(to be purchased only after you have received your visa)*  
**Your insurance policy MUST show proof of the amounts of insurance coverage mentioned below for each of the three areas listed** (and listed on the Certification of Insurance Coverage form).

**Minimum Coverage**

Exchange students must have insurance that provides the following minimum coverage:

- (1) medical benefits of at least **\$100,000** per person per accident or illness
- (2) repatriation of remains in the amount of **\$25,000**
- (3) expenses associated with medical evacuation in the amount of **\$50,000**

*IF your policy does not cover all of the above, you will be required to get a different policy that does. Without the proper insurance, you will not be permitted to attend classes.*

**PLEASE CHECK YOUR POLICY BEFORE SENDING US THE DOCUMENTS.**

**In addition, be sure that your insurance policy:**

- Does NOT have a deductible that exceeds \$500 per accident or illness
- Covers the entire period that you will be in the United States

If you are having difficulty finding the necessary insurance coverage, you may try any of the following:

- [www.isoa.org](http://www.isoa.org)
- [info@InternationalStudentInsurance.com](mailto:info@InternationalStudentInsurance.com)
- [info@compassbenefits.com](mailto:info@compassbenefits.com)

**VERY IMPORTANT:**

- You must respect the **deadlines**. If your documents are late, it may result in your not having sufficient time to get your visa.
- Keep in mind that there is processing time on our end – often by more than one office.
- **All documents must be submitted through the Secure Drop Box to the Baruch College Study Abroad Office. If you receive any emails from other offices, please check with us before responding.**

There is one final document for you to submit, which is the **mailing label form**, which will be used by our mailroom to send your DS-2019 packet to you. **The address that you use MUST be the one where you will be:**

- ◇ in June/July if you are attending for the fall semester.
  - ◇ in November/December if you are attending for the spring semester.
- (PLEASE BE VERY CAREFUL NOT TO MAKE ANY MISTAKES, OR YOUR DOCUMENTS MAY GET LOST IN THE MAIL.)

FROM: INTERNATIONAL STUDENT SERVICE CENTER	
TO:	
NAME:	
ADDRESS 1:	
ADDRESS 2:	
ADDRESS 3:	
CITY:	
PROVINCE/STATE:	
COUNTRY:	
POSTAL CODE:	
PHONE NUMBER:	
EMAIL ADDRESS:	

*(The mailing label form is attached to the same email as this application instructions document.)*

If you follow the instructions above carefully, the processing of your application will be much quicker and go more smoothly. (In other words, the more mistakes there are, the longer the processing time will be, due to back-and-forth communication!) If you have any questions, please do not hesitate to contact us at [study.abroadxc@baruch.cuny.edu](mailto:study.abroadxc@baruch.cuny.edu).

## **Housing**

You have a choice of finding your own housing or applying for housing in the student residence. Please note, however, that there are a limited number of spaces in the student residence, and they will be allotted on a first-come first-served basis. You will find more information on the student residence [here](#). Although the application process for housing has not yet gone “live,” you may submit an “interest form” (you will find this form on the Housing website). If you do so, be sure to mention that you are an exchange student (you should be able to do so on the line for the EMPLID).

Please do not contact FOUND Study – it is the Baruch Housing Office that handles housing matters for Baruch students. **Any general questions about housing should be sent to us at this point, as you are not yet registered in our system (study.abroadxc@baruch.cuny.edu).** If you are applying for housing in the student residence, you will be able to communicate with the Housing Office later in the process. (If you do so, all emails must be copied to our office.)

We look forward to welcoming you to Baruch College and New York City for a semester/year that will leave you with wonderful memories to last a lifetime!

Best regards,  
The Baruch College Study Abroad Office