

# UNIVERSITY OF SOUTH DAKOTA

## INTENSIVE ENGLISH PROGRAM APPLICATION

Please Note: The information requested below must be completed by the applicant. The applicant's personal phone number and e-mail address are required to be considered for admission.

### PERSONAL INFORMATION

1. Name on Passport: \_\_\_\_\_  
Surname Given Name(s)

2. Other name(s), if any, that may appear on academic records: \_\_\_\_\_

3. U.S. Social Security Number (if applicable): \_\_\_\_\_ 4. Gender:  Male  Female

**We are requesting your SSN for administrative record accuracy and reporting. If you have an SSN, disclosure is voluntary and admission will not be affected if you decline to provide it. The SSN number is confidential information under the Federal Educational Rights to Privacy Act and we will not release it without your consent.**

5. Mailing Address: \_\_\_\_\_

6. Address in home country: \_\_\_\_\_

Address 1

Address 1

Address 2

Address 2

City Province/Territory

City Province/Territory

Country Postal Code (ZIP)

Country Postal Code (ZIP)

7. Telephone: \_\_\_\_\_  
Preferred Secondary

8. E-mail: \_\_\_\_\_

9. Place of Birth: \_\_\_\_\_

10. Date of Birth: \_\_\_\_\_  
Month Day Year

11. Citizenship:  U.S. Citizen  U.S. Permanent Resident (Mail a copy of both sides of your I-551 card.)  
 Other (Indicated Below)

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

Visa Type: \_\_\_\_\_

### ADMISSION INFORMATION

1. I am applying for the Intensive English Program for the following semester and year:

Summer  Fall  Spring **AND** Year: \_\_\_\_\_

2. Do you plan to apply for admission to the University of South Dakota after successful completion of the Intensive English Program?  Yes  No

3. If your answer is yes, what is your intended degree of study? \_\_\_\_\_

4. How did you learn about the University of South Dakota's IEP Program? \_\_\_\_\_

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### ACADEMIC HISTORY

1. List the high school from which you graduated: \_\_\_\_\_  
*School Name* *City/State/Country* *Year Graduated*

2. Have you completed your baccalaureate degree?\*  Yes  No If no, when will you complete it? \_\_\_\_\_  
*Month/Year*

3. Institution from which baccalaureate degree was or will be earned:  
\_\_\_\_\_  
*School Name* *City/State/Country* *Year Graduated*

4. Undergraduate Major(s): \_\_\_\_\_ Undergraduate Minor(s): \_\_\_\_\_

5. List chronologically all other baccalaureate or post-baccalaureate institutions you have attended or in which you are presently enrolled:  
\_\_\_\_\_  
*Name of Institution* *Location* *Dates Attended* *Degrees Earned* *Date Degree Earned/Expected*

**A TOEFL or IELTS score is not required for admission to the Intensive English Program. However, any existing TOEFL or IELTS scores will help with student placement into the appropriate IEP level.**

6. Have you taken the Test of English as a Foreign Language (TOEFL)?  Yes  No  
If yes, please provide the date and scores: \_\_\_\_\_  
*Date* *Reading* *Listening* *Speaking* *Writing* *Total Score*

7. Have you taken the International English Language Testing Service (IELTS) Exam?  Yes  No  
If yes, please provide the date and scores: \_\_\_\_\_  
*Date* *Reading* *Listening* *Speaking* *Writing* *Total Score*

8. Have you taken other standardized tests?  Yes  No  
If yes, please provide the date and scores: \_\_\_\_\_  
*Date* *Test* *Score* *Date* *Test* *Score*

9. If you are in the United States now, which type of Visa do you have?  
 F-1  F-2  J-1  J-2  B-1  B-2  Other If other, please provide Visa type: \_\_\_\_\_

If you have an F-1, F-2, J-1, or J-2 Visa, please provide the name of the institution that issued your I-20 or DS2019 form: \_\_\_\_\_

**Please send all application materials to:  
Office of Undergraduate Admissions  
University of South Dakota  
414 East Clark Street  
Vermillion, South Dakota 57069-2390**

***I certify that the information contained in this application is factually correct and complete. I understand that the omission or misrepresentation of any information including enrollment in other colleges or university is sufficient grounds for canceling my admission or registration.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### NOTICE OF NON-DISCRIMINATION

The University of South Dakota is committed to nondiscrimination on the basis of race, sex, national origin, disability, religion, age, sexual orientation, or other nonmerit reasons, in admissions, educational programs or activities and employment (including employment of disabled veterans and veterans of the Vietnam Era), as required by applicable laws and regulations. Responsibility for coordination of compliance efforts and receipt of inquiries, including those concerning Title VI of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act of 1990, has been delegated to the Director of Disability Services, 119B Service Center North, USD, Vermillion, SD 57069. Phone: 605-677-6389 Fax: 605-677-3172 E-mail: dservice@usd.edu

If you are a prospective student with a disability and need assistance or accommodations during the admission/application process, please contact the Director of Disability Services, The University of South Dakota, 414 East Clark Street, 119B Service Center North, Vermillion, SD 57069. Phone: 605-677-6389 Fax: 605-677-3172 E-mail: dservice@usd.edu