TEXAS SOUTHERN UNIVERSITY

OFFICE OF INTERNATIONAL STUDENTS

International Student Check-in Information Form

Name:Last								
Date of Birth:	//	Place o	of Birth:					
	(month/day/year)			City		Country		
Sex: Male	_Female Ma	rital Status: S	Single	Married	<u>Depend</u>	dents with you	in the US:	
Local Address:	Number &							
Local Phone: _	Number d	& Street		Cit	ty 	State	Zip 	
Email Address:	:							
Foreign Addres	ss: Number &							
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City	State/Pro	vince Po	ostal Code	Count	try	Country	y of Citizensh	1р
Student Bachelor's Master's		Major						
Ph.D.								
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