

**CHANGE OF LEVEL OF EDUCATION REQUEST FORM (Admissions Team)**

PLEASE COMPLETE THE INFORMATION						
Is the student in the United States?	YES <input type="checkbox"/>			NO <input type="checkbox"/>		
If yes, what type of Visa (check one)	F1 <input type="checkbox"/>	B1/B2 <input type="checkbox"/>	J1 <input type="checkbox"/>	J2 <input type="checkbox"/>	H1 <input type="checkbox"/>	OTHER <input type="checkbox"/>
STUDENT'S PERSONAL INFORMATION (PLEASE TRANSFER INFORMATION FROM PASSPORT)						
FAMILY NAME			GIVEN NAME (FIRST NAME)			
SMU ID			CITY OF BIRTH			
PERMANENT ADDRESS IN HOME COUNTRY						
STREET ADDRESS						
CITY			PROVINCE/STATE			
POSTAL CODE			COUNTRY			
PROGRAM INFORMATION						
PREVIOUS PROGRAM	UG <input type="checkbox"/>	GR <input type="checkbox"/>	P.h.D. <input type="checkbox"/>	CERT. <input type="checkbox"/>	OTHER <input type="checkbox"/>	IEP <input type="checkbox"/>
PREVIOUS PROGRAM COMPLETION DATE	MM/DD/YYYY					
NEW EDUCATIONAL LEVEL ADMITTED TO	UG <input type="checkbox"/>	GR <input type="checkbox"/>	P.h.D. <input type="checkbox"/>	CERT. <input type="checkbox"/>	OTHER <input type="checkbox"/>	
NORMAL LENGTH OF STUDY (years)	PROGRAM START DATE	(MM/DD/YYYY)				
EXPECTED PROGRAM COMPLETION DATE	(MM/YYYY)					
ENGLISH PROFICIENCY INFORMATION						
Is English proficiency required for this program?	YES <input type="checkbox"/>			NO <input type="checkbox"/>		
If 'No', check one	Test score waived <input type="checkbox"/>		Student from English speaking country <input type="checkbox"/>		Student received English instruction <input type="checkbox"/>	
If 'YES', does the student have the required English Proficiency for admissions?	YES <input type="checkbox"/>		NO <input type="checkbox"/>		Student will be required to complete IEP instruction <input type="checkbox"/>	
PROGRAM FINANCIAL INFORMATION (US DOLLAR AMOUNTS) (PLEASE AN AMOUNT IN ALL BOXES)						
STUDENT EXPENSES ARE BASED ON	12 MONTHS <input type="checkbox"/>		9 MONTHS <input type="checkbox"/>		OTHER (SPECIFY) <input type="checkbox"/>	
TUITION AND FEES	\$					
STUDENT LIVING EXPENSES	\$					
LIVING EXPENSES FOR DEPENDENTS	\$					
OTHER COSTS	Please specify					

STUDENT'S MEANS OF FINANCIAL SUPPORT (U.S. DOLLAR AMOUNT) (ENTER AMOUNT IN BOXES \$0.00 IF NOT APPLICABLE)			
STUDENT'S PERSONAL FUNDS	\$		
FUNDS FROM SMU:	\$	SCHOLARSHIP <input type="checkbox"/>	ASSISTANTSHIP <input type="checkbox"/>
FAMILY FUNDS FROM INSIDE U.S.A.	\$		
FAMILY FUNDS 4 re f EMCSO-9 (S)141 0.24			

-

FINANCIAL EVIDENCE WITH ENOUGH FUNDS FOR ONE ACADEMIC YEAR AND IN U.S. DOLLARS (IF SCHOLARSHIP/ASSISTANCE INFORMATION IS INCLUDED IN ADMISSIONS LETTER, PLEASE ATTACH ADMISSIONS LETTER)

SPONSORSHIP LETTER including Affidavit of support for sponsors in the U.S.

COPY OF PASSPORT (BIOGRAPHICAL INFORMATION AND EXPIRATION) DATE