The University of Northern Iowa requests this information for the purpose of processing this form. All items are required; therefore, incomplete forms cannot be processed. Release of any information is governed by Iowa Board of Regents rules and applicable state and federal statutes.

RETURN THIS FORM TO: National Student Exchange Office  
University of Northern Iowa  
Center for Energy & Environmental Education, Room 10  
Cedar Falls, IA 50614-0285

Please type or print very clearly.

CONTACT INFORMATION
Name: First ___________________________ Middle Initial _____ Last ___________________________

Current Address:
Street/Residence Hall and Room ____________________________________________________________
City, State/Province _________________________________________________________________ ZIP/Postal Code____________________

Permanent Address:
Street ____________________________________________________________
City, State/Province ____________________________________________ ZIP/Postal Code_______________

Cell/Current Phone _______________ Home/Permanent Phone __________________________

E-mail ________________________________

UNI Student ID Number ___________________

DEMOGRAPHIC INFORMATION
Date of Birth (MM/DD/YY): ___________________________ Gender Identity: ☐ Female ☐ Male ☐ Other

☐ Are you currently living in on-campus housing? ☐ Yes ☐ No

Are you a resident of the state of Iowa? ☐ Yes ☐ No

Country of Citizenship: ☐ United States ☐ Canada ☐ Other _________________________________

☐ Non-resident alien — if non-resident alien, visa type_________________ ☐ Resident alien

Primary reason(s) for exchange - check all applicable
☐ access different courses/faculty
☐ evaluate graduate schools
☐ live in a different area
☐ personal growth
☐ participate in host campus international program

☐ enter host campus honors program
☐ exchange as a resident assistant
☐ language study
☐ look for future employment
☐ other: _______________________________
SCHOLASTIC AND OTHER INFORMATION
Current Class Level: Freshman ☐ Sophomore ☐ Junior ☐ Senior
UNI grade point average: ______ Cumulative grade point average: ______
Major: _____________________________ Minor: _____________________________

**Your UNI GPA will determine your rank (priority number) in the placement process among UNI students.**

Will you need courses in your major while on exchange? ☐ Yes ☐ No
Are you currently receiving financial aid? ☐ Yes ☐ No
Where do you plan to reside at the exchange school? ☐ Need on-campus ☐ Prefer on-campus ☐ Off-campus
Are you currently enrolled in the honors program? ☐ Yes ☐ No
Marital Status: ☐ Single ☐ Married
Will you be accompanied on exchange by: spouse ☐ Yes ☐ No children ☐ Yes ☐ No
Do you wish to go on exchange with another student? ☐ Yes ☐ No

If yes, name of the student _______________________________________________________________
Name of campus at which the student is enrolled: ____________________________________________

EDUCATIONAL BACKGROUND
Credits completed to date: ______ Credits enrolled in current term: ____________ Total Hours: ______
Expected graduation term: __________________
Do you have any incomplete grades, missing grades, or other deficiencies (e.g. failure to complete required proficiency tests)? ☐ Yes ☐ No

If yes, please explain: ___________________________________________________________________
Activities, positions, honors while in college: ________________________________________________
_____________________________________________________________________________________

OTHER CONSIDERATIONS
Have you ever been convicted of a felony? ☐ Yes ☐ No
Are you on probation, parole, or have any legal judgments pending against you either inside or outside campus?

☐ Yes ☐ No If yes, please explain: ___________________________________________________________________

Are you currently under any campus disciplinary action for violation of codes of academic or student conduct?

☐ Yes ☐ No If yes, please explain: ___________________________________________________________________

Do you have any outstanding indebtedness to UNI? ☐ Yes ☐ No

Are there circumstances, such as grades or finances, which might cause you to drop out of the exchange program?

☐ Yes ☐ No If yes, please explain: ___________________________________________________________________

EXCHANGE REQUESTS
List in order of preference the institutions you wish to attend. Check the appropriate box indicating how long you wish to exchange.

<table>
<thead>
<tr>
<th>CHOICES</th>
<th>SEMESTER</th>
<th></th>
<th>QUARTER</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Fall 2019</td>
<td>Spring 2020</td>
<td>Fall 2019</td>
<td>Winter 2020</td>
<td>Spring 2020</td>
</tr>
<tr>
<td>First Choice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Second Choice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Third Choice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fourth Choice</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
ESSAY
In your own words, please describe why you wish to participate in National Student Exchange, and provide examples of how you think your experience will contribute to your academic journey. A typed document may also be attached.

__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
__________________________________________________________________________________________
FINANCIAL PLANNING
Please estimate your anticipated resources and expenses. Use your first choice school as your model.

RESOURCES
$_________ Personal Savings
$_________ Parental Support
$_________ Grants
  $_________ Pell
  $_________ UNI
  $_________ SEOG
  $_________ IMAGES
  $_________ Miscellaneous Grants
$_________ Loans
  $_________ Subsidized Stafford
  $_________ Unsubsidized Stafford
  $_________ Perkins
  $_________ PLUS
  $_________ Other: ________________
$_________ Scholarships
  $_________ ______________________
  $_________ ______________________
  $_________ ______________________
$_________ ESTIMATED TOTAL RESOURCES

EXPENSES
$_________ Tuition and fees (UNI)
$_________ Room/Board (Host campus) or Apartment
$_________ Transportation
$_________ Books
$_________ Travel/Trips
$_________ Miscellaneous
$_________ ESTIMATED TOTAL EXPENSES

Do you plan to live on-campus?
Yes _____  No_____  

SPECIAL CIRCUMSTANCES
If you have a physical condition for which accessible, on-campus housing or classroom accommodation might be needed; a documented disability which may require academic accommodation (e.g., notetakers, taped texts); a medical condition which might require immediate attention during exchange; or a condition which might affect emotional or mental well-being during exchange, you are encouraged to identify your needs by attaching a separate page indicating the nature and extent of your circumstances and arrangements which are currently being made for you on this campus. Also indicate whether or not we may contact your requested host campuses at this time.

NSE does not discriminate on the basis of special needs. Rather, your disclosure at this stage of the application process is invited in order to assist you in identifying a placement site which can provide reasonable accommodation of your needs. Following placement, it is your responsibility to consult the host campus coordinator and ADA officer to determine the deadlines by which you must submit written, current, and professionally documented information as required by your host campus. Written documentation is usually due to the host campus two to three months prior to enrollment.

STUDENT SIGNATURE REQUIRED
By signing below, I indicate that the above information is true, and that I understand the policies related to my participation in the National Student Exchange, in particular the policies regarding my responsibilities in terms of finding courses at the host campus, transferring courses back to UNI, withdrawing from the program, living arrangements while on exchange, travel, other financial obligations, and all other policies related to my exchange.

Student’s Signature ___________________________  Date______________

ADVISOR SIGNATURE REQUIRED
I support my advisee’s plans to participate in the National Student Exchange Program.

Advisor's Signature ___________________________  Date______________
Print Advisor's Name ___________________________  Department__________

A $200 application fee must accompany this form. Exact cash or check only.
If paying by check, please make your check payable to UNI/NSE.
This fee is NOT refundable.