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/YYYY): ___________________________ 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 ☐ enter host campus honors program
☐ evaluate graduate schools ☐ exchange as a resident assistant
☐ live in a different area ☐ language study
☐ personal growth ☐ look for future employment
☐ participate in host campus international program ☐ 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.

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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
NOTE: Your estimated resources should be equal to or larger than your estimated expenses. Your resources and expenses may be figured using one semester or two semesters. However, if resources listed are for two semesters, then expenses must be figured for two semesters, also.

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

$__________ Tuition and fees (UNI)
$__________ Room/Board (Host campus) or Apartment
$__________ Transportation
$__________ Books
$__________ Travel/Trips
$__________ Miscellaneous

$__________ ESTIMATED TOTAL EXPENSES

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.