



12a. If you are currently holding a U.S. visa, indicate your visa type and **attach a copy of your current visa (and I-20, if F-1).**  F-1  J-1  A-2

H-4 Other: \_\_\_\_\_  
Please specify

12b. If you are currently holding a U.S. visa, indicate the visa expiration date. \_\_\_\_\_ / \_\_\_\_\_  
Month Year

13. Date you took or will take the TOEFL or IELTS. \_\_\_\_\_ / \_\_\_\_\_  
Month Year

Be sure to request that official test scores be sent to UB. The UB school code for TOEFL is 2925 (SUNY U at Buffalo). For information about IELTS and how to send your test score to UB, please visit [www.ielts.org](http://www.ielts.org).

14. Semester you expect to begin study.  Fall \_\_\_\_\_  Spring \_\_\_\_\_  Summer \_\_\_\_\_  
Year Year Year

**EDUCATIONAL DATA**

**Secondary School**

1) Grade Level	2) Dates Attended From - To	3) Age	4) Type of School	5) Name of School, City/Country	6) Certificates, Diplomas, Graduations, Standardized Examinations Received

**University**

1) Grade Level	2) Dates Attended From - To	3) Age	4) Type of School	5) Name of School, City/Country	6) Certificates, Diplomas, Graduations, Standardized Examinations Received

I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION FORM IS TRUE TO THE BEST OF MY KNOWLEDGE. I understand that withholding information requested on this application or giving false information may make me ineligible for admission or subject to dismissal.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Mail the completed application and supporting documentation to:**

International Admissions  
University at Buffalo  
411 Capen Hall  
Buffalo, NY 14260-1604  
USA

**For more information:**

Tel: (716) 645-6121  
Fax: (716) 645-2528  
E-mail: [intadmit@buffalo.edu](mailto:intadmit@buffalo.edu)