



## APPLICATION FOR ENROLLMENT

Please visit [www.Schiller.edu](http://www.Schiller.edu) if you wish to apply online.

Please place an X in the box for the campus you wish to attend.

U.S.A - FLORIDA	GERMANY – HEIDELBERG	SPAIN – MADRID	FRANCE – PARIS	ONLINE
8560 Ulmerton Road Largo, FL 33771 Ph: +1 855-787-2262	Zollhofgarten 1 69115 Heidelberg, Germany Ph: +49 6221 4581-0	Calle Serrano 156 Plaza de la Republica Argentina, Madrid 28002 Ph: +34 91-448-24-88	9, Rue Yvart 75015 Paris Ph: +33 1-45-38-56-01	Ph: +1 855-787-2262

### **CHECKLIST FOR STUDENT APPLICANTS**

All items listed below are required, and must be submitted with a signed copy of this Application for evaluation purposes.

#### U.S and International Students

- Non-refundable application fee of (see last page for payment details):
  - \$20 for students applying to the Florida/Online campus
  - €50 for students applying to any European campus
- Official certified transcripts (certified English translation, if not issued in English). All students must submit one of the following no later than the end of the second course during the first semester of enrollment:
  - High School transcript (for Bachelor programs) or Undergrad transcripts (for Master programs) showing proof of graduation.
  - GED or other High School equivalency test (must be successfully completed prior to enrollment).
  - Post-Secondary Institution transcripts showing completion of at least 24 earned credits.
- Nursing only – A minimum score of 75 is required on the HESI Test

#### International Students Only

- Proof of assets sufficient to fund your studies (for students seeking admission into the Florida campus only)
- Proof of English Language proficiency level (tests must have been taken within the past 2 years)
  - TOEFL (Test of English as a Foreign Language) 80 (IBT – Internet version) for Bachelor and 89 for Masters, Schiller, TOEFL number is 0835.
  - TOEIC (Test of English for International Communication) score of at least 650 for Bachelor and 700 for Masters.
  - IELTS (International English Language Testing System) score of at least 6.0 for Bachelor and 6.5 for Masters.
  - CAMBRIDGE FCE (First Certificate in English) grade of “B” (B2 level) Or higher – Cambridge Advanced (CAE) or Proficiency (CPE) preferred.
- Photocopy of valid passport (valid student visa may apply depending on campus selected)
- Submit an advance deposit for the first semester of tuition and fees prior to enrollment
- Two (2) passport size photos (European Campuses)



**STUDENT PERSONAL INFORMATION**

Please complete the following, print clearly in CAPITAL LETTERS. All fields must be completed.

Legal Name of Student Applicant (as stated on Passport, Driver's License, Soc. Security Card, etc.):

Family (Last) Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Expected Start Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Degree Desired:  Associate  Bachelor  Master

Degree Program Name: \_\_\_\_\_

Social Security#: \_\_\_\_\_ (USA Only) Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Permanent Mailing Address: \_\_\_\_\_ Current Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone (include country code): \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address (write clearly): \_\_\_\_\_

Citizenship:  U.S. Citizen  U.S. Permanent Resident  Non-U.S. Citizen or Resident

If Non-U.S. Citizen or Resident, please list Country of Citizenship: \_\_\_\_\_

Primary Language: \_\_\_\_\_ Are you fluent in English (if not primary language)  Yes  No

Gender:  Male  Female

Ethnicity (Optional):  African American  Alaska Native  American Indian  Asian  
 Hispanic or Latino  Native Hawaiian  Pacific Islander  White  Two or More Races

Are you a veteran or currently active in the U.S. military?  No  Yes

If yes, please detail: \_\_\_\_\_  
Military Branch Current Status Separation Date (MM/DD/YY)

Are you eligible for Veteran's benefits?  No  Yes

Do you have military transcripts detailing your training (such as AARTS, SMARTS, CCAF. Etc.)?  No  Yes

If yes, please detail: \_\_\_\_\_

**How did you hear about Schiller International University?**

- Institution or company, please name: \_\_\_\_\_
- Military Personnel, please name person & base: \_\_\_\_\_
- Advertisement, please specify where: \_\_\_\_\_
- Internet, please specify which website: www. \_\_\_\_\_
- Current Student or Alumni, please specify name: \_\_\_\_\_
- College Fair, please specify name & country: \_\_\_\_\_
- Friend  Other: \_\_\_\_\_



**PARENT OR LEGAL GUARDIAN OF STUDENT INFORMATION FOR STUDENTS UNDER 18 YEARS OF AGE**

Full Name of  Father  Mother  Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Email Address (write clearly): \_\_\_\_\_

**STUDENT ACADEMIC INFORMATION**

**IMPORTANT NOTE:** Applicants must submit full documentation for ALL education, past and present. Only what is mentioned and submitted along with this agreement will be evaluated by SIU. Documents not mentioned here that are submitted after admission to Schiller will not be accepted or considered for admissions purposes.

What is your highest level of education?  High School  Undergraduate  Graduate  Other

I attest that I have received a HS diploma, or its equivalent, prior to starting my classes with Schiller International University.

Yes  No

**High School Education/ (or its equivalent)**

School Name: \_\_\_\_\_ Country: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Qualifications Earned: \_\_\_\_\_  
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**Post-Secondary Education (please list all colleges or universities with the most recent first)**

School Name: \_\_\_\_\_ Country: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Degree Earned: \_\_\_\_\_  
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School Name: \_\_\_\_\_ Country: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Attended: \_\_\_\_\_ Degree Earned: \_\_\_\_\_  
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**ADDITIONAL INFORMATION FROM STUDENT APPLICANT**

Please write below in English a brief personal statement indicating why you are interested in studying at Schiller International University. Attach additional pages if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



**PAYMENT FORM**

Please complete the Student detail section of this form and submit with your payment for credit card or check payments. Please email or fax a copy of this form for wire bank transfers along with a copy of the wire confirmation as provided by your bank.

Student Family (Last) Name \_\_\_\_\_ Student First Name \_\_\_\_\_ Student Middle Name \_\_\_\_\_

**CREDIT CARD PAYMENT INFORMATION**

I hereby authorize a charge to be made to my credit card as detailed below for the reasons indicated (PRINT):

- |  |   |  |                                 |
|--|---|--|---------------------------------|
| <input type="checkbox"/> Application Fee | <input type="checkbox"/> Deposit          | <input type="checkbox"/> Tuition and Fees    | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Visa            | <input type="checkbox"/> American Express | <input type="checkbox"/> MasterCard/Eurocard |                                 |

<b>Name of Card Holder:</b>			
<b>Address of Card Holder:</b>			
	<b>Country:</b>		
<b>Card Number:</b>			
<b>Expiration Date:</b>		<b>Authorization Code:</b>	
<b>Amount:</b>			

Signature of Card Holder \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

**CHECK PAYMENT INFORMATION**

Please mail checks to the below address in U.S. Dollars and make payable to Schiller International University. Please include a copy of this form with the completed student section with the check.

Bursar's Office, Schiller International University, 8560 Ulmerton Road, Largo, Florida, 33771, U.S.A.

**BANK WIRE PAYMENT INFORMATION**

Any bank charges must be paid by the student or sponsor at source. Please email or fax a copy of this form with the completed student section for **wire bank transfers** along with a **copy of the wire confirmation** as provided by your bank. Please make payment to:

**FLORIDA/ONLINE, USA**

**Bank Name:** SQUARE 1 BANK  
**Bank Address:** 406 Blackwell Street, Suite 240  
 Durham, NC 27701

**Account Name:** KIP SIU LLC  
**Wire ABA:** 053112615  
**SWIFT CODE:** SQARUS33  
**ACCOUNT:** 2182073

**MADRID/PARIS/HEIDELBERG, EUROPE**

**Bank Name:** Volksbank Kurpfalz eG  
**Bank Address:** Hauptstrasse 46, 69117 Heidelberg  
**Bank Code (BLI):** 672 901 00  
**SWIFT/BIC:** GENODE61HD3

**US Dollar Account:** USD 0 220 260 682

**EURO Account:** 40029001/IBAN DE29 6729 0100 0040 0290 01