



Langston University  
Admissions and Enrollment Management  
International Student Admissions  
PO Box 667  
Langston, OK 73050  
William H. Hale Student Center Rm. 201  
405-466-3428(office) 405-466-2931 (Fax)  
international@langston.edu

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## I-20 Application Form

Please print your exact legal name as it appears on your passport. All documents submitted must be in this name. If you are admitted, this name will appear on all permanent records at Langston University.

Name

\_\_\_\_\_  
Surname/Primary Name Given Name

Date of Birth: \_\_\_\_\_ (MM) \_\_\_\_\_ (DD) \_\_\_\_\_ (YYYY)

Country of Birth: \_\_\_\_\_

Country of Current Citizenship: \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

Foreign address (required)

Street: \_\_\_\_\_

City: \_\_\_\_\_

Province: \_\_\_\_\_ Country: \_\_\_\_\_

U.S. Physical Address

Street: \_\_\_\_\_

City: \_\_\_\_\_ Apt. # \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ (Required)

Foreign Telephone \_\_\_\_\_ (Required)

U.S. Telephone \_\_\_\_\_ (Required)

Education Level    \_\_\_ Bachelors        \_\_\_ Masters        \_\_\_ Professional

Program Major (Required) \_\_\_\_\_ (Keep in mind that Nursing and other Allied Health majors require an additional process once the student arrives in the U.S. and therefore admission to LU does not guarantee admission to those programs.)

Where to send I-20 (if different from above)

Name: \_\_\_\_\_

Street: \_\_\_\_\_ Apt. # \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_