



APPRENTICESHIP IN ECOLOGICAL HORTICULTURE

2020 VISA INFORMATION FORM
REQUIRED FOR INTERNATIONAL APPLICANTS

UNIVERSITY OF CALIFORNIA, SANTA CRUZ

NAME **Last** **First** **Middle**

GENDER

DATE OF BIRTH (DOB; example: 12/13/1986) (month/day/year)

COUNTRY OF CITIZENSHIP

COUNTRY OF BIRTH

COUNTRY OF LEGAL PERMANENT RESIDENCE

POSITION IN COUNTRY OF PERMANENT RESIDENCE: If position is in education, please indicate level (i.e., postdoc, grad, undergrad, secondary; also, if self-employed, private or government employer)

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.....

DATE OF ENTRY TO U.S. (month/day/year)

Consulate where scholar will apply for visa, if out of U.S.

CURRENT ADDRESS **Street**

City **State**

Province **Postal Code**

Country

PERMANENT ADDRESS **Street**

City **State**

Province **Postal Code**

Country

SOURCE AND ESTIMATED AMOUNT IN U.S. DOLLARS for entire six-month period of the apprenticeship program:

U.S. government agency (specify) **Amount \$**

Scholar's government agency (specify) **Amount \$**

Other (please describe) **Amount \$**

Personal funds **Amount \$**

DOES THE SCHOLAR CURRENTLY HOLD A NON-IMMIGRANT VISA? Yes No

If yes, what type?