



## International Student and Scholar Data Form

Name: \_\_\_\_\_  
(family) (First) (Middle)

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Student \_\_\_\_\_ Scholar \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

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

City and State: \_\_\_\_\_

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_

I authorize the IA office to provide my name and email to individuals or groups seeking contact with a representative of my country. This authorization is valid during the period of my studies at UNL unless I direct IA otherwise. Yes \_\_\_\_\_ No \_\_\_\_\_

**You will need to sign and date this form at orientation to complete your check-in process.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_