

Student Name: _____ PSU ID: _____

DEPENDENTS - Please fill out the following information on **each** dependent that will accompany you to Pittsburg State University. If additional space is required, please make additional copies of this form.

For spouse: attach copy of marriage certificate/license and passport

For child: attach copy of birth certificate and passport

Relationship: Spouse Daughter Son

First Name: _____

Family Name: _____

Date of Birth: _____

Birth Country: _____

Citizenship Country: _____

Residency Country: _____

Relationship: Daughter Son

First Name: _____

Family Name: _____

Date of Birth: _____

Birth Country: _____

Citizenship Country: _____

Residency Country: _____

Relationship: Daughter Son

First Name: _____

Family Name: _____

Date of Birth: _____

Birth Country: _____

Citizenship Country: _____

Residency Country: _____

Submit to:
PSU International Programs and Services
1701 S. Broadway 118 WH, Pittsburg, KS 66762

FAX to: 620-235-4962