



## International Student Check-In Form

Name: \_\_\_\_\_ DU ID#: \_\_\_\_\_ Today's Date: \_\_\_\_\_  
Family/Last Name Given/First Name Month / Day / Year

### **Your Current Denver Contact Information**

Street: \_\_\_\_\_  
Number Street Address Apt /Room #  
City: \_\_\_\_\_ State: **CO** Zip/Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_ US Phone: \_\_\_\_\_

### **Emergency Contact Information**

Mr.  Ms. \_\_\_\_\_  Speaks English  Doesn't Speak English  
First Name Last Name

Relationship to You:  Parent  Spouse  Other: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City/Town Province/ State Postal Code Country

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Country Code - City Code - Phone Number