



## INTERNATIONAL STUDENT APPLICATION

This form is for students who wish to enroll at College of the Canyons as International Students with F1 or F2 status. The information provided in this application will become part of the applicant's Student Exchange Visitor System (SEVIS) record. Applicants who submit this application form and adequate application requirement documents may obtain a certificate of eligibility (I-20 form) for student visa or student change of status petition.

Obtaining an I-20 form does not guarantee approval of student visas petitions for change of status.

### 1. APPLICATION DETAILS

<b>A. Reason for completing this application:</b> <input type="checkbox"/> Obtain an I-20 for F1 visa application <input type="checkbox"/> Obtain an I-20 for change of status to <input type="checkbox"/> Transfer from a SEVIS approved school <input type="checkbox"/> Study part time while maintaining F1 status at another school	<b>B. Term for which applying:</b> <input type="checkbox"/> Spring <input type="checkbox"/> Fall <input type="checkbox"/> Summer <input type="checkbox"/> Winter  <b>C. Which year:</b>	<b>D. Major of study in an associate degree:</b> A current list of majors is posted online at <a href="http://www.canyons.edu/offices/counseling">www.canyons.edu/offices/counseling</a>  <b>Major 1</b> _____  <b>Major 2</b> _____
---	---	---

### 2. APPLICANT IDENTITY INFORMATION

<b>A. Family name:</b> (last name/surname)	<b>First name:</b> (given name)	<b>Middle initial:</b> (if any)	<b>G. Please affix a passport- style photo on this space</b>
<b>B. Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>C. Date of Birth:</b> Month:      Date:      Year:	<b>D. Age:</b>	
<b>E. Country of Citizenship:</b>		<b>F. Country of Birth:</b>	

### 3. APPLICANT CONTACT INFORMATION

<b>A. Email address:</b>	<b>C. Current location:</b> <input type="checkbox"/> In the USA <input type="checkbox"/> Outside the USA
<b>B. Telephone number/s :</b>	<b>D. How did you find out about College of the Canyons:</b>

**E. Address in the country of citizenship:** Please provide a physical address and not a postal box. Without this address a certificate of eligibility for the student visa will not be issued. This address is where you would return when finished with your academic pursuit here in the United States.

Street name/number \_\_\_\_\_ House/Apartment number \_\_\_\_\_  
 City: \_\_\_\_\_ Province (if any): \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

**F. Mailing address:** This address will be used when mailing all correspondence including the I-20 form.

Street name/number \_\_\_\_\_ House/Apartment number \_\_\_\_\_  
 City: \_\_\_\_\_ Province (if any): \_\_\_\_\_ Country: \_\_\_\_\_ Postal code: \_\_\_\_\_

**G. Address while in the USA:** (fill out only if presently in the USA) :

Number/Street \_\_\_\_\_ Apt number \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_ Cellular phone in the US: \_\_\_\_\_

### 4. PARENT OR GUARDIAN RELEASE OF INFORMATION AUTHORIZATION: If you wish to authorize the International Student Program to release information about your student status at College of the Canyons to a particular person or persons, please indicate the name and relationship below. If you wish to a list more than two people, please include them on a separate paper.

1. Authorized person's full name:	Relationship to you:
2. Authorized person's full name:	Relationship to you:

### 5. FAMILY MEMBERS DEPENDENT ON YOUR STUDENT STATUS: Fill out only if applicable. Please attach translated and certified copies of the marriage certificate, family certificate and copies of dependent passport identity pages for each dependent. If you have more than three dependents list them on a separate paper.

Name of Spouse:	Spouse's date of Birth: Month	/ Date	/Year
Name of Child:	Child's date of Birth: Month	/Date	/Year
Name of Child:	Child's Date of Birth: Month	/ Date	/Year



INTERNATIONAL STUDENT APPLICATION REQUIREMENTS QUESTIONNAIRE

6. PROOF OF SECONDARY EDUCATION: Translated and certified copies of diploma, equivalency test certificates, transcripts as well as letters of expected completion issued by your school's designated official are acceptable.

- A. Have you completed your secondary education or taken the equivalency test?
B. Have you attached proof of completion of your secondary education?

7. ENGLISH PROFICIENCY: College of the Canyons requires all international students to be proficient in the English Language. Please indicate below what document you have attached to show your English proficiency.

- Identity page of your passport showing English as your country's official language
US High School graduation diploma
TOELF/ IELTS/STEP EIKEN test score document showing at least the minimum of the points required
Official transcripts showing completion 24 transferable units at a US college or university
Other (please explain):

8. PROOF OF FINANCIAL ABILITY TO COVER EXPENSES FOR ONE ACADEMIC YEAR: A cost estimate document may be obtained at the International Students Program office or the office's website which may be accessed through this link: www.canyons.edu/isp/costestimate . Proof of financial ability is not required for applicants who wish to concurrently enroll or study part time at College of the Canyons.

- A. Will you be paying for the costs associated with studying as an international student?
B. Have you attached a recent bank account statement showing your name, account number and the necessary funds to cover expenses for one academic year at College of the Canyons?
C. Will a sponsor provide the required funding for your studying and living expenses?
If you answered yes to question 7C please indicate below:
Have you enclosed the sponsor's bank issued statement and affidavit of support from?
Does your sponsor currently reside in the United States?
Note: US residing sponsors must complete and sign the USCIS form I-134 and attach the supporting evidence required in the USCIS I-134 instruction form. Current forms may be accessed at www.uscis.gov.

9. TUBERCULOSIS CLEARANCE: College of the Canyons requires all international students to provide proof that they are Tuberculosis free. Doctor or clinician issued documents of results of tuberculosis skin tests or results of chest x-rays will be accepted. Your doctor or clinician may complete the College of the Canyons tuberculosis clearance form.

Have you enclosed a doctor endorsed document showing you are free of tuberculosis? YES NO

10. HEALTH QUESTIONNAIRE

- A. Do you have conditions that require special diet, activity, restrictions or other special needs?
If you answered "YES" please list your condition(s):
B. Do you have conditions which would restrict your participation in physical education classes?
If you answered "YES" please list:
C. Do you have any allergies?
If you answered "YES" please list:
D. Are you taking any medications?
If you answered "YES" please list:

11. IMMUNIZATIONS: College of the Canyons recommends that all international student applicants obtain translated- certified copies of their immunization records. Please indicate whether or not you have a record of having received the immunization.

- A. Poliomyelitis
B. Two doses of Measles/Mumps/Rubella (MMR) Dates: 1st dose 2nd dose
C. Meningitis
D. Two doses of Varicella / Dates 1st dose 2nd dose
E. HPV/Gardas: 1 series.
F. Tetanus-Diphtheria (within 10 years)
G. Three doses of Hepatitis A&B / Dates 1st dose 2nd dose 3rd dose

INTERNATIONAL STUDENT APPLICANT SIGNATURE: By signing and dating below you are declaring that you understand the requirements of this form. By signing and dating below you agree that inaccurate and incomplete information will result in dismissal of your application for a certificate of eligibility for an F1 visa, change of status, transfer or part time attendance at College of the Canyons. Students under 18 years old at the time of application must attach a guardian statement to the application.

Signature of Applicant Date