College of Marin - Intensive English Program

INTERNATIONAL STUDENT (F-1 VISA) APPLICATION
Fall 2013: August 20 – December 6, 2013

ELIGIBILITY:
You must be at least 18 years of age by the first day of the semester. AND you must have completed at least one year of English studies. PLEASE NOTE: students who will NOT be 18 years of age by the first day of the semester must have their parent and/or legal guardian sign a “Parent/Legal Guardian Authorization” form available by contacting Paulette Foster, DSO-International Students (contact information on page two)

APPLICATION DEADLINE for International Students (F-1 visa):
- SPRING: Completed application will be accepted SEPTEMBER through NOVEMBER 15 of each year.
- FALL: Completed application will be accepted MARCH through JULY 15 of each year.
- Students submitting incomplete applications or after the application deadline will not be considered.
- Please be advised, notification of admissions (including receiving the I-20 form) may take up to 20 working days to process after the completed application is received.

APPLICATION PROCESS:
1. Complete and submit Page 1 and 2 of this application form.

2. Complete and submit the “Official Certification of Personal or Family Funds” Page 3 showing proof for one semester of $12,292 (fall) $12,516 (spring) or $24,804 for two semesters of study. This is the estimated cost of living in the U.S. for the period of study including medical insurance for the student only. Additional funds must be added for all dependents on F-2 visas. The original form must be signed and stamped by a bank official and will not be accepted if dated more than 6 months prior to the beginning of the semester of application. (All fees are subject to change)

3. TRANSFER STUDENTS ONLY (transferring from another school in the US) Complete and submit the “Transfer Form” Page 4. Please Note: The College of Marin will be unable to complete the admissions process until the current school releases your student file in SEVIS (Student and Exchange Visitor Information System.)

4. Submit a copy of your current Passport biographical pages (surname, given name, date of birth etc.) with the completed application

5. Submit the application fee of $50 for one or $100 for two semesters with the original copies of pages 1, 2 and 3 (FAX COPIES NOT ACCEPTED) and Page 4 if applicable and copy of Passport biographical pages. Please note: the application fee is non-refundable and non-transferable.

6. Acceptance Information: Eligible students will receive (by regular U.S. mail delivery) an acceptance packet from the Admissions Office which will include the I-20 A/B student visa, information about submitting payments for both registration and medical insurance fees. The packet will also include information about the required $100 SEVIS I-901 fee that ALL students are required to pay prior to entering the U.S. on an F-1 visa. Students will also be mailed information about testing during the first week of school from the Intensive English Program.

7. Students receiving an acceptance packet must submit the registration form with the tuition fee payment for one semester AND the medical insurance (non-refundable) fee prior to the first day of classes. Fees may be paid by MasterCard/Visa, money order, cashier’s check or cash (in person only). *TUITION REFUND requests will not be accepted after the second week of the term. There is a $10.00 service fee charged for tuition refunds. The medical insurance fee is non-refundable.

ATTENDANCE REQUIREMENTS AND REFUND POLICY: Students enrolled in the Intensive English Program are required to attend all classes unless a student is ill or has a verified personal emergency. Students are also required to speak English in classes and to keep up with the course work and homework. Students who fail to meet these requirements may be asked to leave the program or will not be permitted to attend subsequent semesters. Students on an F-1 student visa must complete at least one full term at College of Marin before transferring to another school. I understand the deadline to request a refund for *tuition fees will not be accepted after the second week of the term. (The medical insurance fee is non-refundable)

Signature: _______________________________ Date: _______________________________
Student must sign personally

<table>
<thead>
<tr>
<th>FEES FOR ONE SEMESTER</th>
<th>FEES FOR TWO SEMESTERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Application Fee: $50</td>
<td>Application Fee: $100</td>
</tr>
<tr>
<td><strong>Tuition:</strong> $3060(fall) $3,284(spring) (Subject to change)</td>
<td><strong>Tuition:</strong> $6,340 (Subject to change)</td>
</tr>
<tr>
<td>Room &amp; Board: (on shared basis) $7,033.50</td>
<td>Room &amp; Board: (on shared basis) $14,067</td>
</tr>
<tr>
<td>Transportation: $540</td>
<td>Transportation: $1,080</td>
</tr>
<tr>
<td>Personal: (miscellaneous) $1,408.50</td>
<td>Personal: (miscellaneous) $2,817</td>
</tr>
<tr>
<td>Books, Supplies &amp; Field Trips: $200</td>
<td>Books, Supplies &amp; Field Trips $400</td>
</tr>
<tr>
<td><strong>TOTAL COST $12,292 - 12,516 (Subject to change)</strong></td>
<td><strong>TOTAL COST $24,804 (Subject to change)</strong></td>
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**Tuition cost includes non-refundable medical insurance. All international students attending the Intensive English Program are required to purchase the medical insurance recommended by the College. There are no medical insurance waivers due to having another medical policy (see medical insurance rate schedule attached). Optional medical and/or dental insurance for dependents are available at additional cost to student. 07/12
College of Marin – Intensive English Program

Type or print with ink. All questions must be completed (in English) before any admissions action can be taken.

I am applying for one semester: _____ spring 2013  OR  I am applying for two semesters: _____ spring 2013 AND fall 2013 $50.00 non refundable/transferable application fee for one semester  $100.00 non refundable/transferable application fee for two semesters

Conditional Admissions Agreement: Students who successfully complete the Intensive English Program (completing all the assignments in level 3) at the College of Marin will be admitted to the International Student credit program. The TOEFL exam will be waived but all other conditions for admissions to the credit program must be met (www.marin.edu/international_students).

Legal (Family/Last) Name (on Passport): __________________________ First Name_________________________ Last Name_________________________

Birth date (month/day/year): ______/_______/_________  Male: __________  Female: __________

*please note, if not 18 yrs of age by first day of semester, “Parent/Legal Guardian Authorization” form must accompany application – contact Paulette Foster – DSO International Students (see contact information below)

Country of Birth: __________________________  Country of Citizenship: __________________________

Foreign Address & Phone: __________________________

U.S. Address & Phone: __________________________

Phone Number: __________________________  U.S. Phone Number: __________________________

Email address: __________________________

Address to mail I-20: __________________________

For additional information on admissions, contact
Paulette Foster – DSO International Students
Telephone: (415) 457-8811 ext. 8114
E-mail: paulette.foster@marin.edu
For additional information on the Intensive English Program, contact
Sara Oser-IEP Coordinator
Telephone: (415) 457-8811 ext. 8579
Email: sara.oser@marin.edu Webpage: www.marin.edu/IEP

DEPENDENTS:
Will your legal dependents be accompanying you during your stay in the U.S. as an international student? [ ] Yes [ ] No
If yes, attach a separate sheet listing all the following dependent information: 1) Family Name, 2) First Name, 3) Date of Birth (M/D/Y), 4) Country of Birth, 5) Country of Citizenship, 6) Gender, 7) Relationship.

NOTE: This information will serve as the dependent’s eligibility documentation for visa issuance purposes and for entering the U.S. as a dependent of a student. The financial form total dollar amount must also be adjusted to verify funds are available for both you and your dependents.

EDUCATION RECORD:
Did you graduate from high school, secondary school, lycee or gymnasium? Yes _________  No________
How many years have you studied English? [ ] 1 yr [ ] 2-4 yrs [ ] 5 + yrs
Have you attended a school in the U.S.? Yes____  No____
If yes, list school, location and dates of attendance.

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Location</th>
<th>Dates Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________________________</td>
<td>__________________________</td>
<td>M / D / Y to M / D / Y</td>
</tr>
<tr>
<td>__________________________</td>
<td>__________________________</td>
<td>M / D / Y to M / D / Y</td>
</tr>
</tbody>
</table>

ANSWER ONLY IF YOU ARE CURRENTLY IN THE U.S.  Are you attending a school in the U.S. now? Yes_______  No_______
If yes, name of school: __________________________
Date you will finish: __________________________ M / D / Y
What type of visa do you have? __________________________ Admission Number (I-94) __________________________ Date of Entry __________________________ M / D / Y
Port of Entry __________________________ Expiration Date __________________________ Date of Entry __________________________ M / D / Y
Have you submitted a request to U.S. Immigration to extend your stay on your current visa? Yes ___  No _____
If yes, what is the current status of the extension? __________________________ If the extension was approved, how long was it extended? __________________________
If you requested a change of visa status, what type of visa are you requesting? __________________________ What is the current status? __________________________

I certify under the penalty of perjury that I have provided complete and accurate responses to the items on this application. I further certify (swear) that all official documents submitted in support of this application are authentic and unaltered records that pertain to me.

Applicant’s personal signature __________________________ Date 09/12
## Medical Insurance Rate Schedule 2012 - 2013

### Tentative rate schedule

(All rates are subject to change)

<table>
<thead>
<tr>
<th>Category</th>
<th>Coverage Period</th>
<th>Rate ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual</td>
<td>8/1/12 – 7/31/13</td>
<td>1,340</td>
</tr>
<tr>
<td>Fall</td>
<td>8/1/12 – 12/31/12</td>
<td>560</td>
</tr>
<tr>
<td>Spring/Summer</td>
<td>1/1/13 – 7/31/13</td>
<td>784</td>
</tr>
<tr>
<td>Spouse</td>
<td>Monthly</td>
<td>309</td>
</tr>
<tr>
<td>Dependent (1 or 2 child)</td>
<td>Monthly</td>
<td>107</td>
</tr>
<tr>
<td>Dependent Children</td>
<td>Monthly</td>
<td>302 (3 or more)</td>
</tr>
</tbody>
</table>

07/2012