



ALAMO COLLEGES DISTRICT Palo Alto College

Attach
Passport Size
Photograph

INTERNATIONAL STUDENT: I-20 APPLICATION

STUDENT INFORMATION

(PLEASE PRINT INFORMATION AS LISTED ON PASSPORT)

Last Name: _____ First Name: _____

Middle Name: _____ Date of birth: ____/____/____ Male ____ Female ____ OUIFS @
MM DD YYYY

Passport Number: _____ Passport Expiration Date ____/____/____
MM DD YYYY

Country of Birth: _____ @ \$JUZG#SUI@

\$PVOUSZG\$JUJFOTIJ@

Email: _____ Telephone: _____

Street Address: _____ City: _____ ☒

State/Province: _____ Postal Code: _____ Country/Territory: _____

_____ ☒

City: _____ State: _____ ☒ Code: _____

*BNBUIOHGPS ☒☒☒☒ Fall TFNFTUFS(August) @ ____ @ Spring TFNFTUFS(January) @ ____ @
☒☒ ☒☒

- *BNApplying as: New ☒☒ from home country)
- Transfer ☒☒ Attending U.S. college/university)☒
- Change of ☒ status ☒☒☒☒ (from another visa category ☒☒☒☒)

_____ @

&OHMJTI-BOHVBHF1SPGJDJFODZ

Knowledge of English: Excellent Good Average Poor

TOEFL/IELTS Score: _____

VISA INFORMATION

Are you currently in the United States? Yes No If yes, what type of visa do you have? _____

**If you have an F-1 visa, attach copies of ALL I-20's from each school attended and your I-94, passport and F-1 visa.*

Will you return to your home country to apply for the F-1 visa? Yes No

I-20 Delivery:

Electronically to applicant email Mail to the following representative Following representative will pick up Form I-20.

I, _____, hereby authorize the following representative to receive or collect my Form I-20.
(Applicant name)

Signature Required: _____ Date: _____

REPRESENTATIVE INFORMATION

Last Name: _____ First Name: _____

Street Address: _____ City: _____

State/Province: _____ Postal Code: _____ Country/Territory: _____

Relationship to applicant: _____ Telephone: _____

EMERGENCY CONTACT INFORMATION

(CONTACT SHOULD BE A PERSON WHO CAN BE CONTACTED IN THE USA)

Last Name: _____ First Name: _____

Street Address: _____ City: _____

State/Province: _____ Postal Code: _____ Country/Territory: _____

Relationship to applicant: _____ Telephone: _____

I certify the information on this application is true and correct. I understand any false or misleading information could result in the cancellation of my Palo Alto College I-20 application.

Applicant Signature

Date

Note: Receipt of the Form I-20 does not guarantee F-1 visa issuance or USCIS approval for change of status.

Dependent Form

This form is used to identify family members (**spouse and/or children**) who will apply for the F-2 dependent visa. A form I-20 will be issued to eligible dependents. If there are more than 3 dependents, please print additional copies of this page.

DEPENDENT- 1

Last Name: _____ First Name: _____

Middle Name: _____ Date of birth: ____/____/____ Male ____ Female ____
MM DD YYYY

Passport Number: _____ Passport Expiration Date ____/____/____
MM DD YYYY

Relationship to Student: _____ Country of Birth: _____

City of Birth: _____ Country of Citizenship _____

DEPENDENT - 2

Last Name: _____ First Name: _____

Middle Name: _____ Date of birth: ____/____/____ Male ____ Female ____
MM DD YYYY

Passport Number: _____ Passport Expiration Date ____/____/____
MM DD YYYY

Relationship to Student: _____ Country of Birth: _____

City of Birth: _____ Country of Citizenship _____

DEPENDENT - 3

Last Name: _____ First Name: _____

Middle Name: _____ Date of birth: ____/____/____ Male ____ Female ____
MM DD YYYY

Passport Number: _____ Passport Expiration Date ____/____/____
MM DD YYYY

Relationship to Student: _____ Country of Birth: _____

City of Birth: _____ Country of Citizenship _____

Financial Resources and Requirements

You must provide appropriate documentation that you and/or your sponsor have the ability to meet the financial requirements to cover the cost of attending Palo Alto College for the duration of your program of study.

Estimated Cost of Attendance per Year

Tuition & Fees	\$7,848.00
Books & Supplies	\$500.00
Living Expenses	\$11,512.00
Miscellaneous Expenses (food, gas, etc.)	<u>\$5,140.00</u>
Total	\$25,00.00

Financial Resource Requirement

An official letter on bank stationery is required to verify proof of financial resources. An additional \$5,000 U.S per dependent is required if a spouse or children will accompany the F-1 student. **Bank statements are not accepted.**

The bank letter must include the following information:

- Name of account holder
- Bank account number
- Type of account(s) - checking or savings
- Date account(s) were established
- Current account balance (within 60 days)
- Current official rate of exchange from local currency to U.S. dollar.
- Title and signature of bank official
- Telephone number and email address of bank official

Confirmation of Financial Resources

The Alamo Colleges requires confirmation of financial resources of all applicants who are not United States citizens or do not hold permanent residence. Evaluation for admission will not begin until the proper financial statements are on file. Students are encouraged to pay tuition, fees, and other charges at the beginning of each term. Installment payments are available through the Alamo Colleges Business Office. **It is the responsibility of the international student and his or her sponsor to meet all financial obligations.**

Financial Guarantee Statement

I certify that I will have the minimum of \$25,000 and an additional \$5,000 for each of my dependents in U.S. currency available for the duration of my program of study at Palo Alto College. This amount does not include funds required to travel to and from the U.S. The required funds will be provided by:

Check all that apply:

You must provide the sponsors name if other than the applicant

Self

Parent(s)

Parents Name

Other

Name and relationship to applicant

I certify that I and/or my sponsor have adequate funds for my travel to and from the United States.

Signature of Student

Date

Sponsor Affidavit of Financial Support

I, _____ residing at
Sponsor's Name

Street Address City State Country Postal code

I Certify:

That I am _____ years of age, and do do not reside in the United States since (date) _____.

This affidavit is being completed on behalf of the individual listed below:

Name of student Relationship to sponsor

Additional dependents: Spouse and/or children: _____

Select option below that best describes your level of sponsorship

- I will make available to the student listed above the full sum of \$25,000 and the additional \$5,000 for each dependent(s) for the duration of the program of study at Palo Alto College. The funds are readily available and in addition to any travel funds needed to travel to and from the applicant's home country.
- I certify that I will make available a partial monetary contribution to the above mentioned student and/or his/her dependents in the amount of \$_____ for the duration of the applicant's program of study.

I understand that I am solely responsible for the financial support of the applicant and will be held accountable by Palo Alto College for maintaining the terms of this statement.

I affirm that the contents of this Affidavit signed by me with the attached documentation are true and correct.

Signature of Sponsor

Date

If the sponsor is a U.S. citizen or permanent resident this affidavit must be notarized.

Signed before me this _____ day of _____ of 20__ in _____, County. _____

Notary Public



ALAMO COLLEGES DISTRICT

Palo Alto College

International Student Statement of Understanding

1. I and/or my sponsor will have sufficient funds for tuition, fees, and living expenses every semester I am enrolled at Palo Alto College. I understand the cost of living is high and international students are not allowed to work and financial aid for international students is generally not available.
2. I understand meeting the international student admission requirement does not guarantee admission to all programs offered by Palo Alto College. I further understand that programs offered in specific areas, such as Dental Hygiene or Nursing, have a separate application and admission requirements.
3. I understand if my college placement exam scores in Reading, English, and Math are not at college level, I must enroll in developmental courses.
4. By U.S. immigration law, I must enroll full-time (12 semester hours or more) every fall and spring semester, otherwise, I will be in violation of my F-1 status.
5. I understand tuition must be paid in full by the tuition payment deadline or my courses will be dropped for non-payment. I also understand that payment plans are available to me and arrangements can be made with the Alamo Colleges Business Office.
6. I authorize all Alamo Colleges to release any information required by the United States Citizenship and Immigration Services (USCIS) to determine my compliance with U.S. immigration laws. I further understand that Alamo Colleges must report in the Student and Exchange Visitor Information System (SEVIS) those students who are not registered for classes or who are not pursuing a full-time course of study.
7. I certify that the Alamo Colleges nor any of its member colleges are not liable, legally or otherwise, under any circumstances for any expenses or problem difficulties (financial, health related, legal) I may incur while in the United States.
8. I understand students who were placed on academic dismissal or academic suspension at their previous institutions and are seeking transfer to the Alamo Colleges must follow the academic dismissal policy outlined in the Alamo college's catalog.
9. I understand that only one internet course is allowed per fall and spring semester.
10. I understand instructors will drop students for non-attendance. I also understand the consequences for falling below the USCIS full-time enrollment requirement will result in the termination of my SEVIS record.
11. I understand that as an international student I am required to have adequate health insurance while in the U.S. and I must provide verification of health insurance every semester I am enrolled.
12. I understand I and/or my sponsor are solely responsible for paying my tuition, fees and living expenses while enrolled at Palo Alto College. I further understand, Palo Alto College or the International Student Office will not seek funding on my behalf.

I certify that I have read and understand the information on this form and all documents I have submitted to support my application are true and correct. I further understand false information could result in my dismissal from Palo Alto College in accordance with the college's rules and regulations.

Applicant Name

Date