



City College of San Francisco

International Student Application Form

(For F-1 International Student Status)

For Office Use Only
 Application Received:
 Date: _____ By: _____
 Method: _____
 Applicant #: _____
 CCSF ID #: _____

I. PROGRAM INFORMATION: (please only select one program)

New Student Transfer Student Continuing Student Re-Enter Student Concurrent Enrollment

Academic Program: Spring 20 _____ Fall 20 _____ Summer 20 _____

Conditional Admission:

<input type="checkbox"/> Spring 20 _____	<input type="checkbox"/> 18 Weeks - January to May	<input type="checkbox"/> 9 Weeks - March to May
<input type="checkbox"/> Summer 20 _____	<input type="checkbox"/> 8 Weeks - June to July	<input type="checkbox"/> 4 Weeks - July
<input type="checkbox"/> Fall 20 _____	<input type="checkbox"/> 18 Weeks - August to December	<input type="checkbox"/> 9 Weeks - October to December

Intensive English Program:

<input type="checkbox"/> Spring 20 _____	<input type="checkbox"/> 18 Weeks - January*	<input type="checkbox"/> 9 Weeks (I) - January*	<input type="checkbox"/> 9 Weeks (II) - March*
<input type="checkbox"/> Summer 20 _____	<input type="checkbox"/> 8 Weeks - June*	<input type="checkbox"/> 4 Weeks (I) - June*	<input type="checkbox"/> 4 Weeks (II) - July*
<input type="checkbox"/> Fall 20 _____	<input type="checkbox"/> 18 Weeks - August*	<input type="checkbox"/> 9 Weeks (I) - August*	<input type="checkbox"/> 9 Weeks (II) - October*

(*Sessions being in the month indicated)

II. PERSONAL INFORMATION: (please print clearly)

1a. Name (as it appears on your passport)

Last (Family): _____
 First (Given): _____
 Middle: _____

1b. Name of your spouse (if he/she accompanied you to U.S. on F2 status)

Last (Family): _____
 First (Given): _____
 Middle: _____

2a. Date of Birth: _____ / _____ / _____
Month Day Year

2b. Are you Under 18 years old? Yes No
(If YES, please submit Minor Consent Form - Download from our website)

3a. Male Female

3b. Single Married

4a. Country of Birth: _____

4b. Country of Citizenship: _____

5. E-mail Address: _____ @ _____

6a. Complete permanent address in your home country (required):

Street Address: _____

 City: _____ State/Province: _____
 Postal/Zip Code: _____ Country: _____
 Home Country Phone Number: _____

6b. Complete address you wish to have your acceptance package and/or I-20 mailed to: (please check your delivery method)

Free Local Mail - for students with a U.S. address only \$75 DHL - for new students in their home country only

Name of Receiver: _____
 Delivery Street Address: _____

 City: _____ State/Province: _____
 Postal/Zip Code: _____ Country: _____
 Phone Number of Receiver: _____

6c. If you would like to pick up or have someone else pick up your acceptance package and/or I-20, please provide their information:

Full Name: _____ Phone #: _____
 Relationship to Applicant: _____ E-mail: _____

6d. Complete local address in the U.S.: (if you are presently in the U.S.)

Street Address: _____

 City: _____ State/Province: _____
 Postal/Zip Code: _____ U.S. Phone Number: _____

III. ETHNIC BACKGROUND: (please check all that apply)

Are you Hispanic or Latino/a? YES NO

- 01 Hispanic, Latino/a
- 02 Mexican, Mexican-American, Chicano
- 03 Central American
- 04 South American
- 05 Hispanic Other
- 06 Asian Indian
- 07 Asian Chinese
- 08 Asian Japanese
- 09 Asian Korean
- 10 Asian Laotian
- 11 Asian Cambodian
- 12 Asian Vietnamese
- 13 Filipino
- 14 Asian Other
- 15 Black or African American
- 16 American Indian/Alaskan Native
- 17 Pacific Islander Guamanian
- 18 Pacific Islander Hawaiian
- 19 Pacific Islander Samoan
- 20 Pacific Islander Other
- 21 White

IV. EDUCATION INFORMATION:

1a. What is your intended major (field of study) in the U.S. (*)? _____

(* If undeclared, please put down General Education or Liberal Art. Please put down IEP for Intensive English Program only)

1b. What is your intended education goal in the U.S.?(please check one only)

- AA/AS Degree BA/BS Degree MA/MS Degree Certificate Language Training Only (IEP)

2a. Full names of last High School attended: _____

Date of Graduation (if applicable): _____

2b. Full names of last College/University attended: _____

Date of Graduation (if applicable): _____

3. English Proficiency: I have TOEFL/IELTS score of: _____ Date Taken (MM/YYYY): _____

- Waiver Request:** My native language is English I studied in an English speaking school for more than 3 years
 I graduated from high school, college, or university in the U.S. or other English speaking country

4. Do you have a 2-year Associate Degree from the U.S.?(*) Yes No **If yes, from where?** _____

Do you have a 4-year Bachelor's Degree from the U.S.?(*) Yes No **If yes, from where?** _____

Do you have a Master's Degree from the U.S.?(*) Yes No **If yes, from where?** _____

*If you answer yes to any of the above questions in #4, please submit a copy of your diploma & a personal statement explaining why you want to study at CCSF

V. CURRENT STATUS: (if you are currently in the U.S. only) **Are you applying for Change of Status in the U.S. ?** Yes No

1. Are you currently on F-1 international student status? Yes No **If No, what visa type are you currently on?** _____

1a. If yes, is your I-20 currently in good status? Yes No

If yes, which school are you studying at now? _____

If yes, how long have you been there? _____

If yes, are you attending full time? _____

If yes, what is your SEVIS I-20 number? N _____

1b. If you are not on F-1 status, what type of visa or status type are you currently on? _____

VI. FINANCIAL INFORMATION:

1. Who provides your financial support? Myself Family(*) Sponsor(*) Student Loan Government(*)

(*) Name of family member, sponsor, organization, or government: _____

(*) Relationship to applicant of family member, sponsor, or organization: _____

VII. GENERAL INFORMATION:

1. How did you hear about CCSF? Family Friends Current/Former CCSF Students Agents

Fair Other _____

VIII. ACKNOWLEDGEMENT:

I hereby certify that the information set forth in this application is true to the best of my knowledge. If accepted to City College of San Francisco, I hereby agree to abide by all the rules and regulations set forth by the college.

STUDENT SIGNATURE

DATE