HIGHLAND COMMUNITY COLLEGE
APPLICATION FOR ADMISSION
INTERNATIONAL STUDENTS
(Please Print or Type in English)

Student Number (leave blank)

1. _________________________________________________________________________________________
   Last Name (Surname)                        First Name                  Middle Name

2. Permanent Home Address: ____________________________
   City and Country: ____________________________

3. U.S. Address (if known): ____________________________
   City and State: ____________________________

4. Date of Birth __________________  5. City & Country of Birth: ____________________________
   Month/Day/Year

6. Country of Citizenship: ____________________________

7. _____ Male _____ Female               8. _____ Married _____ Single

9. Name and Address of Parent or Guardian (if living) or Spouse:

__________________________________________________________________________________________
__________________________________________________________________________________________

10. Name and Address of Friend or Relative Living in U.S.A.

__________________________________________________________________________________________

11. Visa Information:
   If you currently hold a U.S. Visa, indicate the type:
   _____ F-1   _____ F-2   _____ J-1   _____ J-2   _____ Other
   Date Visa Expires: __________________    Date of Entry: __________________
   INS Admission Number: __________________
   Institution that issued I-20 or IAP-66 for Visa: __________________

12. English Proficiency Information:
    Check (+) your present knowledge of English:
       Good      Fair      Poor      None
       Speaking:                           _____     _____     _____     _____
       Listening Comprehension:            _____     _____     _____     _____
       Reading:                            _____     _____     _____     _____
       Writing:                            _____     _____     _____     _____
   List other languages spoken: __________________
   Most current TOEFL score: ____________   Date taken: ____________
   (We will need official copy)

13. Other Testing   Check (□)
   _____ SAT   Score ______  Date Taken ______
   _____ ACT   Score ______  Date Taken ______

14. Educational Background:
Primary
Name of School: ____________________________________________________________
City and Country: __________________________________________________________
Dates of Attendance: From:_______________ To:_______________

Secondary
Name of School: ____________________________________________________________
City and Country: __________________________________________________________
Dates of Attendance: From:_______________ To:_______________

University Education
Name of College or University: _____________________________________________
City and Country: _________________________________________________________
Dates of Attendance: From:_______________ To:_______________
List all Diplomas, Certificates and Degrees: ________________________________
(Please send copies of school transcripts)

15. List any work experience. (Give City and Country)
________________________________________________________________________
________________________________________________________________________

16. Educational Plans:
Field of study at Highland: ________________________________________________

Do you plan to transfer to a four-year college or university?
_______ yes ______ no

If yes, do you know where?

I plan to enter Highland: Fall _____ Spring _____ Summer _____, 19_______

I certify that all information on this application is complete and accurate
to the best of my knowledge. I understand that withholding or giving false
information will make me ineligible for admission or may cause my dismissal
and deportation.

________________________________________________________________________
______________________________________              __________________________
Signature of Student                                         Date

Student e-mail address (if applicable) ____________________________
HIGHLAND COMMUNITY COLLEGE
STATEMENT OF STUDENT FINANCIAL RESPONSIBILITY

NAME: ___________________________________________ Last                  First                     Middle

DATE OF BIRTH: ________________________________________

COUNTRY OF BIRTH: ________________ COUNTRY OF CITIZENSHIP: ________________

ADDRESS IN HOME COUNTRY: __________________________________________________
___________________________________________________________________________

INFORMATION

Highland Community College will not issue an I-20AB until this form is completed and returned to the Admissions Office.

You are required to certify and include documentation that you will have available funds for the first year of study at Highland. You must also indicate how you will meet your expenses for the following year. You must remember that you will be entering the United States on a Student (F-1) Visa and will not be allowed to work. If you plan to bring your spouse and/or dependent children, you must certify your ability to provide financial support for them.

STUDENT RESPONSIBILITIES

1. All required forms must be completed and returned to the Admissions Office.
2. The student is responsible for securing all financial resources.
3. In the event a private sponsor, government agency, or third party is delinquent with financial support, the student is held personally responsible.
4. The student must report any changes in address and financial support.

I have read and fully understand the above information and responsibilities.

_____________________________________         _____________________________
Student Signature                                      Date
<table>
<thead>
<tr>
<th>Sources</th>
<th>Amount (U.S. Dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Personal and/or family savings: Please have parents sign below and attach letter of support from family bank.</td>
<td>$ _______</td>
</tr>
<tr>
<td>2. Private Sponsor: Please have sponsor sign below and attach letter of support from sponsor's bank.</td>
<td>$ _______</td>
</tr>
<tr>
<td>3. Government Sponsorship: Please attach appropriate letter and/or documents.</td>
<td>$ _______</td>
</tr>
<tr>
<td>4. Other: Please attach all necessary documents.</td>
<td>$ _______</td>
</tr>
</tbody>
</table>

**TOTALS:** $ _______ | $ _______

---

**OFFICIAL CERTIFICATION**

I/We certify that the information given on this form is true and accurate and that the above listed funds are available and will be provided as specified.

Parent or Sponsor's Signature: ______________________________________________________________________

Parent or Sponsor's Name: ______________________________________________________________________

(Print or Type)

Relationship of Sponsor to Applicant: ______________________________________________________________________

Address of Sponsor: ______________________________________________________________________

Name and address of student's/parent's/sponsor's (circle one) bank:

________________________________________________________________________

________________________________________________________________________

I, __________________________________________________________________, certify that the amount of funds available to me for my first year at Highland Community College is $ __________, and the amount for my second year is $ __________. I certify that I will have adequate funds to travel to and from the United States. I further certify that the information provided is true and correct and that I shall not require financial assistance from Highland Community College.

Student Signature ____________________________________________________________________________ Date __________