



# International Student Application Packet



Admissions  
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Admissions@umpqua.edu



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## International Student Application Checklist

**All requirements on this list MUST be met before the I-20 (Eligibility Document) will be released.** Use this checklist to track what you need to complete for your international application. Incomplete applications will remain on file for one year only. **Do Not Return This Page to Our Office.**

Sent	Date	Document or Form
		Completed International Student Application
		Non-refundable application processing fee of \$150.00 by U.S. Money/Postal Order
		Copy of English proficiency scores
		Writing Sample
		Financial Statement with required bank statements
		International Student Academic Agreement
		Verification of Health Insurance
		Completed Educational Background Chart
		Official copies of all previous educational records from secondary, post-secondary schools, colleges, or universities you have attended in the United States or abroad.
		Copy of passport pages: Copies of the pages containing the signature and photo with name and birthdate.
		<b>If you are transferring from a U.S. High School or U.S. college/university:</b> Must complete Notice of Intent to Transfer. Please attach a copy of your I-94 & I-20.
		<b>Express Mail (optional):</b> Please send an <b>additional</b> \$55.00 U.S. Currency, if you would like your I-20 mailed to you "Express Mail". Prepare for up to three (3) weeks mailing time to receive the I-20 by standard mail.

**Additional information may be obtained at <https://www.umpqua.edu/international-students>**



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## International Student Application for Admission

### SECTION 1 – PERSONAL INFORMATION (AS PRINTED IN PASSPORT)

Surname/Family Name \_\_\_\_\_ First Name/Given Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
 Passport Name \_\_\_\_\_ (Names found in the machine readable section  
 of the passport leaving out the separator character "<")  
 Email Address (required) \_\_\_\_\_ Current Telephone Number \_\_\_\_\_  
 Country of Birth \_\_\_\_\_ City of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_  
 Date of Birth (example: June 03, 1979) \_\_\_\_\_  Male  Female Marital Status:  Single  Married  
 Native Language \_\_\_\_\_ Other Languages \_\_\_\_\_

#### Home Country Mailing Address (required):

Number and Street \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_  
 State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ P.O. Box (if Applicable) \_\_\_\_\_  
 Phone# \_\_\_\_\_

#### U.S. Mailing Address (address within the U.S. if you have one):

Number and Street \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_  
 State/Province \_\_\_\_\_ Postal Code \_\_\_\_\_ P.O. Box (if Applicable) \_\_\_\_\_  
 Phone# \_\_\_\_\_

*UCC does not provide housing for international students. We can provide information about apartments in close proximity of the college and transportation (local bus).*

What are your plans for housing? \_\_\_\_\_

Term you Plan to Begin:  Summer (July)  Fall (September)  Winter (January)  Spring (April)

Are you currently living in the U.S.?  No  Yes

If yes, what is your immigration status?  F-1  No Visa (outside USA)  Other: \_\_\_\_\_

Where would you like your acceptance packet sent?  Home country mailing address  U.S. Mailing address

Have you previously attended UCC?

No, I will be a new UCC Student

Yes, When: \_\_\_\_\_ UCC ID # \_\_\_\_\_

#### Person to be notified in case of emergency (either in the U.S. or abroad):

Name \_\_\_\_\_ Relationship to you \_\_\_\_\_

Address \_\_\_\_\_ Telephone number \_\_\_\_\_

**SECTION 2 – FAMILY INFORMATION (AS PRINTED IN PASSPORT)**

Will your spouse and/or children be coming with you to the US?  No  Yes (list Family Members Below)

Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_ Birthdate \_\_\_\_\_

Country of Birth and Citizenship \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_

Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_ Birthdate \_\_\_\_\_

Country of Birth and Citizenship \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_

Family Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_ Birthdate \_\_\_\_\_

Country of Birth and Citizenship \_\_\_\_\_  Male  Female Relationship \_\_\_\_\_

**SECTION 3 – EDUCATIONAL INFORMATION**

**Educational Goal:** What do you plan to study at UCC? Major Program \_\_\_\_\_

*You can find a list of majors at <http://www.umpqua.edu/areas-of-study>. If you leave this blank we will automatically make your major Associate of Arts Oregon Transfer (AAOT).*

Will you have completed secondary/high school before starting your program at Umpqua Community College?

No  Yes If yes, provide date of your actual or estimated high school graduation: \_\_\_\_\_

Have you attended a school in the U.S.?  Yes  No

If you are currently studying at a school in the U.S., do you plan to leave the U.S. before starting at UCC?  Yes  No

**SECTION 4 – ENGLISH PROFICIENCY (TEST AND WRITING SAMPLE)**

**The following scores show the required English proficiency (Please send copy of test results):**

- TOEFL: Paper 500, Computer 173, Internet 61
- ELPT: 950
- IELTS: 6.0
- MELAB: 72ACE: Level 5
- ESL: Level 109 course completion at accredited English as a Second Language (ESL) Institute

*UCC Institutional Code: 4862*

Test Type: \_\_\_\_\_ Score: \_\_\_\_\_ Location of Test \_\_\_\_\_ Test Date: \_\_\_\_\_

Are you currently studying at an English Language Institute?  Yes  No If yes, \_\_\_\_\_  
Score/Level Date

ESL Institution

Mailing Address of ESL Institution

**Writing Sample:** On a *separate* piece of paper, write a paragraph in your own words about:

- Your educational/occupational goals. Why do you want to study in the U.S.?
- What is your objective? How long do you wish to study at U.C.C.?
- What do you plan to do when you finish your program here?
- College or University you may want to transfer to when you complete UCC?
- Include any other information you would like us to share with us about you, your family or culture.

**SECTION 5 – HEALTH INSURANCE INFORMATION**

International students are required to have health insurance. Students must purchase the Health & Accident Insurance offered through Umpqua Community College or provide proof of equal or better coverage that is effective in the United States and will be in effect throughout your course of study at UCC.

- I currently do not have international health and accident insurance but will purchase the insurance through Umpqua Community College.**
- I have other international health and accident insurance that is valid in the US and will be in effect during my entire course of study at UCC.**

If not, provide name of Company, policy number and expiration date of Health and Accident Insurance. Please submit the insurance coverage summary outline with this application (must be written in English):

Insurance Company Name: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Effective Date of Coverage: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province/State: \_\_\_\_\_ Country: \_\_\_\_\_

I hereby certify that the answers and information provided are true, complete, and correct to the best of my knowledge.

\_\_\_\_\_  
Student Name (please print)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**APPLICATION SIGNATURE**

I hereby certify that the information I have provided is accurate and complete to the best of my knowledge and that failure to disclose and submit complete and accurate information and all required documents may result in denial of admission or dismissal for the College.

\_\_\_\_\_  
Student Name (please print)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

**Questions?**

- Email the International Admissions Office at: [admissions@umpqua.edu](mailto:admissions@umpqua.edu)
- Visit <https://studyinthestates.dhs.gov/students>



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## International Student Academic Agreement

### Section 1 – STUDENT REQUIREMENTS

If I am admitted to Umpqua Community College to study as an international student, I hereby agree to:

1. Enroll in courses appropriate to my course of study as agreed upon with my UCC Academic Advisor.
2. Enroll in, attend, and complete a full-time day program (a minimum of 12 credits of study each quarter). (Allowed maximum of one online class each quarter.)
3. Obtain approval of a UCC Academic Advisor before adding or withdrawing from a class.
4. Be able to maintain my finances including living expenses and tuition for the period of time needed to complete my education at UCC. This means paying for each term of classes by the first day of the term.
5. Undergo the necessary tests recommended by my UCC Academic Advisor to demonstrate my proficiency in the use of English and any other tests necessary for class placement.
6. Enroll in any courses recommended by my UCC Academic Advisor to improve my English ability, if testing indicates such classes are necessary.
7. Maintain uninterrupted Health & Accident Insurance during the time I am in the United States on UCC's I-20. I understand I must purchase the Health & Accident Insurance offered through UCC or provide proof of equal or better coverage.

### Section 1 – STUDENT AGREEMENT

I understand that if I fail to meet any of the above requirements, or if I fail to maintain at least a "C" average, and complete 12 credits each quarter, Umpqua Community College will be required to notify the United States Citizenship and Immigration Services. They will also notify my sponsor that I am on probation or that my approval to enroll in the college has been canceled and I will not be permitted to continue my training at Umpqua Community College.

I understand it is my responsibility to keep UCC advised of any changes with my address and, should I decide to visit outside the United States of America, for any reason, I must obtain permission from Umpqua Community College and obtain a travel form (I-20) from the college. (Such permission is only granted to students in good standing and preparation of travel paperwork requires at least two weeks' notice to the college.)

I further understand that I will NOT be permitted to work off campus unless authorized by the United States Citizenship and Immigration Services.

**I have read the above conditions and fully understand and agree to act in accordance by them.**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Name (please print) \_\_\_\_\_



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## International Student Education Background

This form is an important part of your admissions file. Be sure to list all English language programs followed in the United States or elsewhere and all work experience.

### Section 1 – Instructions for Section 2 below

Column 1	On each line write the appropriate years for every school year you attended. All years since beginning school must be listed.
Column 2	Write your age. If you were six (6) years old when you attended school for the first time, write "6" on the first line. Do not list preschool or kindergarten. Continue by writing your correct age for each grade you attended.
Column 3	These are the actual years you attended school. Your first year is number one (1), your second year is number two (2), etc. Do not list preschool or kindergarten. You must account for every year. If you were out of school for a length of time, it must be noted. Allow one line for each year.
Column 4	Enter the name of each school or institution you attended.
Column 5	Enter the City and Country of each school attended.
Column 6	Write the name of any internal or external examination(s) you passed or certificates you obtained at the end of that year. For example: if you sat for the General Certificate of Education (GCE) at the end of your 11th year in school, on that line write: GCE.

### Section 2 – Student educational background chart

(1) Academic Year	(2) Your Age	(3) Year in School	(4) Full Name of School	(5) Location of School (City and Country)	(6) Certificates, Diplomas, Degrees Obtained
		1			
		2			
		3			
		4			
		5			
		6			
		7			
		8			
		9			
		10			
		11			
		12			
		13			
		14			
		15			



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## International Student Sample Budget

The items below is an estimate of your expenses for the first *academic year* (nine months unless noted).

	Per Term (Quarter)	Per Academic Year (3 terms)*
Tuition and Fees	\$3,084 (based on 12 credits)	\$9,252
Room and Board	\$1,800 (\$600/month)	\$7,200 (12 months)
Books and Supplies	\$535	\$1,605
Incidentals	\$800	\$2,400
Transportation	\$495	\$1,485
Insurance	\$435	\$1,740 (12 months)
<b>Total</b>	<b>\$7,149</b>	<b>\$23,682</b>

\*Room & Board and Student Insurance are based upon a full calendar year (12 months). You may expect to spend more or less depending upon your situation. However, you must demonstrate the ability to meet the total amount listed **before** UCC can issue you an I-20 (Eligibility Document).

### Expense Details:

- 1. Tuition & Fees:** The 2020-2021 International tuition rate is \$254.50 per college credit plus a \$30.00 per term Registration and Insurance fee. As an international student, you are required to enroll and satisfactorily complete a minimum of 12 credits per term and not recommended to enroll in more than 18 credits per term. There are three (3) terms per year that the student must attend before a term off is available (usually summer).
- 2. Room and Board:** Single bedroom apartments with kitchens in the community are available for approximately \$500-700 per month plus utilities (\$200/mo) (ex: electric, phone, etc.). **This is only an estimation.**
- 3. Books and Supplies:** Books are purchased at the beginning of each quarter. If the student is taking one or more sequence courses, the fall quarter books for these courses may be used the entire year. **This is only an estimation.**
- 4. Incidentals:** Any other expenses other than those listed.
- 5. Transportation:** Estimation for public transportation and/or gas expenses.
- 6. \*\*Insurance:** Students must purchase the Health and Accident Insurance offered through the college or provide proof of equal or better health coverage.





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## International Student Notarized Financial Statement

### Documentation MUST be received to support your statement.

**If funded by...** family, friends, relatives, or other responsible person, they must complete Section 2 of this form.

**If funded by...** your government, a letter certifying sponsorship must be received.

**If funded by...** personal savings, a statement from your bank (amount of money to be stated in terms of U.S. currency) must be received.

**If funded by...** other, submit supporting documents accordingly.

### Section 1 – To be completed by the student

\$	Personal Savings
\$	Family
\$	Friends
\$	Your Government
\$	Tuition Scholarship
\$	(Specify) Other:
\$	TOTAL (Must cover at least \$23,682/academic year)

I, \_\_\_\_\_ (print student name) certify that the total amount of money that I have available for my expenses is \$ \_\_\_\_\_.

Student Signature: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ (day) \_\_\_\_\_ (month) \_\_\_\_\_ (year)

Signature of Notary Public: \_\_\_\_\_

My commission expires: \_\_\_\_\_

Notary address: \_\_\_\_\_

(SEAL)

### Section 2 – To be completed by other responsible source (Family/Friends/Organization)

I, \_\_\_\_\_ (Name of individual or organization) certify that the information furnished by the applicant above is a true and a correct statement of the financial resources that I will make available for the applicant's study in the United States.

Individual Signature: \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ (day) \_\_\_\_\_ (month) \_\_\_\_\_ (year)

Signature of Notary Public: \_\_\_\_\_

My commission expires: \_\_\_\_\_

Notary address: \_\_\_\_\_

(SEAL)



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## Notice of Intent to Transfer

If you are on an F-1 visa, and are requesting to transfer to Umpqua Community College from another U.S. institution AND have remained in the United States since that transfer, please provide the following information. We will not be able to process your immigration document until this form is returned and you may encounter difficulties with your immigration status.

### Section 1- To Be Completed by Student

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ PHONE: \_\_\_\_\_  
Month Day Year

E-mail \_\_\_\_\_

I authorize a school official at my prior/current school to provide Umpqua Community College with the information requested below.

Signature \_\_\_\_\_ Date \_\_\_\_\_

### Section 1- To Be Completed by International Student Advisor/PDSO or DSO

**NOTE: This form is required as part of the application process to verify student's F-1 immigration status. This form is only for information purposes. We are not requesting that the SEVIS record be transferred at this time.**

Student's SEVIS ID Number: \_\_\_\_\_ Dates of Attendance: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Is the student's SEVIS record currently active  Yes  No

Is the student in status with respect to F-1 immigration regulations?  Yes  No

If no, please explain circumstances: \_\_\_\_\_

Has this student been approved for part-time enrollment in the past?  Yes  No

If yes, please list approval reasons and dates: \_\_\_\_\_

Last authorized vacation term \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

Has this student ever been granted practical training?  Yes  No

If yes, please indicate type and dates: \_\_\_\_\_

If admitted to UCC, what will be the SEVIS release date? \_\_\_\_\_

Must apply for reinstatement - over 5 months since last attendance

Name of institution: \_\_\_\_\_

Address of institution: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ Fax: \_\_\_\_\_

School Official Signature \_\_\_\_\_ Date \_\_\_\_\_

SEVIS School Code: Umpqua Community College - POO 214F00199000