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## Spring 2018 International Student Credit Program Application

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Submit your application by the deadline for the term you wish to begin your study. We will notify you of our decision within one week of receiving your completed application. If accepted, College of Marin will send you the SEVIS I-20 form and acceptance letter. You must take this form to the American Embassy or Consulate (<http://usembassy.state.gov>) in your country to apply for the F-1 Student VISA. VISA processing times vary at different embassies and consulates so allow enough time to obtain the VISA and make travel arrangements. You must arrive at COM by the report date listed on the I-20 form.

Semester	Application Filing Period Begins	Guaranteed Consideration Deadline*	Transfer Applicant Deadline	Report Date	Classes Begin
SPRING 2018	September 1, 2017	November 30, 2017	January 2, 2018	January 8, 2018	January 22, 2018

There are 2 easy ways to apply to College of Marin:

**1. By Email**

Complete our International Student Credit Program Application. Scan and email your application forms and supporting documents in PDF or JPEG format to: [jpaulino@marin.edu](mailto:jpaulino@marin.edu) or [mbarnett@marin.edu](mailto:mbarnett@marin.edu)

**2. By Mail or in Person**

Complete our International Student Credit Program Application. Mail or deliver your application forms and supporting documents to the address listed below. If you have family or friends in our area, they can deliver the documents in person.

**College of Marin  
Enrollment Services  
835 College Ave  
Kentfield, CA. 94904**

*\* Complete applications received after the guaranteed consideration deadline may be considered on a case-by-case basis at the discretion of the Dean of Enrollment Services.*

**Application Checklist:**

1. International Student Credit Program Application
2. Guarantee of Financial Support and supporting bank documents
3. Application fee of \$50 USD. Payable by credit card, money order or personal check.
4. Proof of English Proficiency
5. Copies of High School Diploma or Certificate of graduation
6. Copy of Passport
7. Transfer Students attending a high school or college in the U.S. must submit official transcripts and I-20.
8. If adding a dependent, please provide a copy of their passport.

**Mandatory Health Insurance**

College of Marin has a **mandatory health insurance plan**. All international students are required to purchase the plan prior to the start of each semester. You have the option to purchase the plan by semester or for the entire year online at [www.studentinsuranceusa.com](http://www.studentinsuranceusa.com) or in person at the Enrollment Services Office. The estimated cost of the plan is \$1,500 USD per year.

**Fall semester** (August 1 through December 31) and **Spring/Summer** (January 1 through July 31.)

**Discrimination Disclaimer:** The College of Marin does not discriminate on the basis of race, religious creed, color, national origin, ancestry, ethnic group identification, physical disability, mental disability, medical condition, genetic condition, marital status, sex, gender, gender identity, gender expression, genetic information or sexual orientation in any of its policies, procedures or practices; nor does the District discriminate against any employees or applicants for employment on the basis of their age. This non-discrimination policy covers admission, access and treatment in District programs and activities—including but not limited to academic admissions, financial aid, educational services and athletics-and application for District employment.

### Estimated Expenses

College of Marin estimates you will need a minimum of **\$28,500 USD** for one academic year (two full semesters which do not include the Summer Session). **\*\*Costs of attendance are subject to change at any time.\*\*** If you have friends or family in our community who will provide free housing for you, documentation of only **13,500 USD** is required.

Estimated Student Expenses for One Academic Year	
College of Marin Tuition Fees: Based on 24 units per year@ \$307 per unit <b>**Tuition and Fees are Subject to Change**</b>	\$7,500
Living Expenses (Housing / Room and Board)	\$15,000
Books and Supplies	\$1,400
Miscellaneous costs: Transportation, personal, clothing expenses	\$3,100
College of Marin Medical Insurance	\$1,500
<b>Total Expenses</b>	<b>\$28,500</b>

**\*\*Note: An additional \$5,000.00 is required for each dependent\*\***

The tuition amount is based on a minimum of 12 college units per semester required for students to remain in legal F-1 VISA status. Many students typically enroll in more than 12 units, so actual tuition expenses may be slightly higher.

### Proof of English Proficiency

Applicants to the International Student Credit Program must provide proof of English proficiency through one of the following tests or language programs. Please send official score report from one of the following:

Test/Language Program	Minimum Score/Level
TOEFL <a href="http://www.toefl.org">www.toefl.org</a>	61 (IBT) or 500 written test
IELTS <a href="http://www.ielts.org">www.ielts.org</a>	6.0
ELS	Level 109
COM IEP	Level 3

### Important Information

- **Medical insurance:** We will provide more information about College of Marin's required Medical Insurance Plan upon acceptance.
- **Attendance regulations:** International students are required to attend school full time and complete a minimum of 12 units each semester.
- **Employment regulations:** Students are allowed to work on-campus only, up to 20 hours per week during the school term. Off campus employment is not permitted without permission from DSOs.
- **Tuberculosis Test:** Students are required to obtain a tuberculosis test clearance from our Campus Health Center upon arrival.
- **Housing:** College of Marin does not provide student housing. For more information about of campus housing, visit <https://housing.marin.edu>

## College of Marin Guarantee of Financial Support/Housing & Meals

The College is required by law to verify that sufficient funding is available for the student. It is possible to have more than one sponsor. **Each sponsor must complete and sign this form** (form may be copied for multiple uses). The minimum amount required is **\$28,500 USD** for the first academic year. Actual expense may be higher. **Attach bank documents** demonstrating sufficient financial support in the amount indicated here. If housing and meals are provided to the student at no cost, the minimum amount required is **\$13,500 USD**. **Persons providing housing and meals must also complete and sign this form.**

<b>Applicant's Information</b>	Applicant's Name:	
	Applicant's Country:	
	Email:	
	<input type="checkbox"/> I am sponsoring myself. I will provide my own bank documents. <input type="checkbox"/> My sponsor will provide funding. See below.	
<b>Sponsor will provide:</b>	Name:	
	Address:	
	Relationship to applicant:	
	Sponsor's email or phone number (+ country code):	
<p><b>Financial Support Information:</b>          Indicate here how much and for how long funds will be provided to support the applicant named above. Attach original documentation from your bank. Please note the following:</p> <ol style="list-style-type: none"> <li>1. Bank documents must be recently issued within the last 6 months.</li> <li>2. Bank documents must clearly indicate the type of currency.</li> <li>3. The sponsor's name must appear on the bank documents and must match the name on this form.</li> </ol>		
<b>\$ USD Per Year</b>	<b>Number of Years</b>	<b>Source of Funds (please describe)</b>
<p><b>Sponsor's Statement of Guaranteed Funding:</b>          I certify that funding in the amount indicated here will be available to support the applicant named above during his/her program at the College of Marin. I am providing bank documents to verify funding.</p> <p>Signature of Sponsor _____ Date _____</p>		
<p><b>Housing Guarantee:</b>          I certify that I will provide housing and meals at no cost to the applicant named above during his/her program at the College of Marin.</p> <p>Signature _____ Date _____</p>		

## College of Marin Guarantee of Financial Support: Required Funding Documentation for F-1 VISAs

We are required by law to verify that each student has sufficient funds to cover the period of their stay in the U.S.A. In most cases, the documentation will also be required at the U.S. Embassy or Consulate when applying for the F-1 VISA. Please review the list below before submitting your documents:

- Copies of bank documents are acceptable for COM. (Original bank documents should be presented at the VISA interview).
- **Acceptable** forms of funding include personal savings accounts or investment accounts. The sponsor's name must appear on the bank documents.
- Bank documents must be no more than 6 (six) months old. Both the U.S. government and COM require recent documents.
- Funds may be in U.S. dollars or your country's currency. The documents should clearly show the account balance, type of currency and their U.S. dollar (USD) equivalents.
  
- It is okay to have more than one sponsor providing support as long as the total is equal to the amount required. It is usually easier to get an F-1 VISA if at least some of the money comes from the home country.
- Each sponsor must submit a Guarantee of Financial Support. This form can be copied and used for multiple sponsors if needed.
- We may request additional information or documents if needed.

### Estimated Expenses:

College of Marin estimates you will need a minimum of **\$28,500 USD** for the first year. This estimate is based on an Academic Year (2 semesters) and does not include living expenses during the summer. If you have friends or family in our community who will provide housing / room & board at no cost for you, documentation of only **\$13,500 USD** is required.

<b>Estimated Student Expenses for One Academic Year</b>	
College of Marin Tuition Fees: Based on 2 units per year @ \$307 per unit <b>**Tuition and Fees are Subject to Change**</b>	\$7,500
Living Expenses Housing / Room & Board	\$15,000
Books and Supplies	\$1,000
Miscellaneous costs: Transportation, personal, clothing expenses	\$3,100
College of Marin Medical Insurance	\$1,500
<b>Total Expenses</b>	<b>\$28,500</b>

**\*\*Note: An additional \$5000.00 is required for each dependent\*\***

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**Applicant Information**

Name: Last (Family/Surname) as it appears on your Passport \_\_\_\_\_ First (Given) \_\_\_\_\_ Middle \_\_\_\_\_

Date of Birth: (Month/Day/Year) \_\_\_\_\_  Female  Male \_\_\_\_\_  
Gender Primary Language

Country of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

**Degree/Program of Study**

Home Country – Permanent Address:		U.S. Address	
Number and Street:		Number and Street:	
Address 2 (Box, Apt, etc.)		Address 2 (Box, Apt, etc.)	
City:		City:	
State / Province / Prefecture		State / Province / Prefecture	
Country	Postal Code	Country	Postal Code
Mobile / Telephone number (Include Country Code)		Mobile / Telephone number (Include Country Code)	
E-Mail Address (Must use U.S. email account, such as Gmail, Yahoo, MSN. International email accounts such as QQ.com are not accepted.)		E-Mail Address (Must use U.S. email account, such as Gmail, Yahoo, MSN. International email accounts such as QQ.com are not accepted.)	

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If you are in the U.S. now, please indicate your current VISA type: \_\_\_\_\_ 4

Date of entry into the U.S.: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

VISA Expiration Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Do you plan to travel outside the U.S before attending College of Marin No Yes Travel Date: \_\_\_\_\_

**English Proficiency:**

TOEFL: \_\_\_\_\_ (score)

ELS Level 109

IELTS: \_\_\_\_\_ (score)

COM IEP Level 3

**Educational Background: (Please list your high school and any college/s attended)**

High School Attended	City/Country	Date Completed	Diploma
_____	_____	_____	_____
University/College Attended (If Any)	City/Country	Date Completed	Diploma
_____	_____	_____	_____
Name of U.S. school you are currently attending	City/State	Date Started	
_____	_____	_____	

**Emergency Contact Information:**

This information will remain on file for the duration of your enrollment. If a change occurs, please report it to Enrollment Services immediately.

Emergency Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Mobile Number: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Relation to Applicant: \_\_\_\_\_

\_\_\_\_\_  
Applicant Signature Date: \_\_\_\_\_

(Month/Day/Year)

\_\_\_\_\_  
Agent Signature Date: \_\_\_\_\_

(Month/Day/Year)

Paid  Cash  Check  Visa  Master Card

Credit Card #: \_\_\_\_\_ CVV \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_