

NONCREDIT INTENSIVE ENGLISH PROGRAM International Student Application

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Thank you for applying to the College of Marin Intensive English Program (IEP)! If you have any questions about this application, please contact the International Education Office for assistance.

2021/2022 Application and Enrollment Schedule				
Enrollment Period Application Deadline		Classes Begin		
Fall 2021	July 12	August 21, 2021		
Spring 2022	November 15	January 22, 2022		

Cost of attendance and dates are subject to change.

Please submit your completed application by email. If you are unable to submit an electronic copy of your application, please let the International Education Office know.

Email your completed application and supporting documents in PDF or JPEG format to: international@marin.edu

APPLICATION CHECKLIST

☐ Completed and signed application
$oldsymbol{\square}$ Completed F1 International Student Financial Affidavit form
and supporting documents (see page 6)
☐ English Assessment Measure (see box*)
☐ Copy of passport and any current U.S. visa/status document
□ \$50 application fee payable by credit card, money orde or check
lacksquare Additional documents may be requested
If you are a transfer student , please include the following:
☐ Copy of your current I-20
☐ Copy of I-94
\square Transfer Form (to be finalized <u>after</u> acceptance)
If you are under 18 years old , please include the following:
☐ Completed Minor Consent Form (see page 7)
☐ Official High School or College/University Transcript

*English Assessment Measures:

College of Marin uses a variety of assessments to determine a student's English level and placement in the Intensive English Program. Students may be required to take additional assessments upon acceptance and/or upon arrival. As assessment scores are combined with other factors to determine the best placement level for each student, we do not require minimum scores upon application.

Please submit your scores from one or more of the following:

- TOEFL IBT
- Other English language exams including IELTS, iTEP, PTE, or EIKEN
- Any other criteria that may help us to assess your English level

Students who do not have any of the above-mentioned assessment measures can arrange to take a College of Marin online Institutional TOEFL exam, if and when available.

If a student has reached an IBT TOEFL score of 61+ (or equivalent), we invite you to apply to our Academic Degree Program.

CREDIT VS. NON-CREDIT IEP FORMAT

The Intensive English Program has both a credit and non-credit format. Students who place into High Intermediate level and above, will be placed in the credit IEP format, while all other students will be placed in the noncredit IEP format. Both programs offer the same level of academic excellence. Students enrolled in the credit format will have the opportunity to gradually add in classes with native English speakers.

ADMISSIONS PROCESS

Additional documents may be requested to complete your application. If accepted, a SEVIS form I-20 and Letter of Acceptance will be issued to you in your Welcome Packet. The SEVIS form I-20 is an important document that must be presented when applying for an F1 visa and upon entering the United States. Visa processing times vary significantly, so allow enough time to obtain a visa and make travel arrangements.

CHANGE OF STATUS APPLICANTS

Applicants who currently hold J1 status must apply for F1 status a minimum of 30 days before their current program end date. Government processing times can take several months, so advanced planning is necessary. Please be advised that a Change of Status denial will require that the applicant leave the United States immediately or apply for reinstatement.



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TUITION AND ESTIMATED EXPENSES

Students must be prepared to pay IEP tuition in full by the first day of classes. The estimated amount below includes living expenses, tuition, medical insurance, and other costs that a student can reasonably expect to incur during one year of study at College of Marin.

Estimated Student Expenses for One Academic Year		
Tuition and Fees (see note below)	\$9,058	
Estimated Living Expenses (Housing and Meals)	\$15,000	
Estimated Cost of Medical Insurance	\$1,500	
Total Expenses	\$25,558	
*Fees include Application Fee and Student ID & Transportation Fee. An additional \$5000 is required for each F-2 dependent.		

Tuition and Fees Note: College of Marin requires applicants to show a minimum of \$25,558 USD in available funds at the time of application. This estimate is based on participation in two semesters of academic study. The cost of tuition is dependent on enrollment in our credit or noncredit IEP format. Tuition in our credit IEP format is applied per unit, while our noncredit format is applied as a flat-fee. Please note that tuition for our non-credit IEP format is \$7980 per year, while tuition for our credit IEP format is approximately \$9000 per year.

Living Expenses Note: If friends or family living in the area will provide housing and meals at no cost or compensation for the duration of the applicant's program, documentation of \$10,558 USD will be accepted.

BANK DOCUMENT SUBMISSION GUIDELINES

Acceptable documents/accounts: Checking or savings account statements or a bank's letter of financial guarantee with an official bank stamp. All accounts must be "liquid" so that funds can be withdrawn at any time.

Unacceptable documents/accounts: Business accounts, insurance policies, certificates of deposit, investments, and shared accounts.

Documents must:

- Clearly show account holder's name, date, total available funds, and type of currency
- Be clear and easy to read
- Be dated within the last six months

Copies/scans of bank documents will be accepted when applying to IEP.

Additional information or documents may be requested.

SCHOLARSHIPS

Scholarship opportunities are available. For more information regarding scholarships, please email the International Education Office at **international@marin.edu**.

IMPORTANT INFORMATION

- Refund Policy: IEP tuition refunds will not be granted after the first 5 days of the program.
- Health Insurance: COM requires all F1 students to purchase health insurance prior to the start of each semester. While purchasing a medical insurance plan is mandatory, College of Marin offers students the opportunity to find an insurance plan that best fits their individual needs.
- Tuberculosis Test (TB): Accepted students are required to submit a tuberculosis clearance to the Student Health Center upon arrival. If a student tests positive for TB, they must have a chest x-ray and receive clearance from a doctor before returning to class. Additional information will be provided in your Welcome Packet.
- Housing: The International Education Office is happy to provide information about off-campus student housing, homestay programs, and some best practices when looking for local apartments or rooms for rent. Please note that College of Marin does not provide any on-campus student housing.



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APPLICATION TYPE				
	☐ Transfer Student (with current F1 status) ☐ Change of Status: J1 to F1 ☐ Fall 2021—Starting August 21 ☐ Spring 2022—Starting January 22			
STUDENT INFORMATION (PLEAS	SE PRINT CLEARLY)			
1. Name (as it appears on your pass	port):			
Last (Family):				
First (Given):				
Middle:				
2. Date of birth:month/day/year	3. Are you 18 years or older? \square Yes \square No			
4. Country of birth:				
5. Country of citizenship:				
6. Email address (must be a US based host such as Gmail, Hotmail, or Yahoo):				
7. Complete address in your home o	country:			
Street address:				
City:	State/Province:			
Postal/ZIP Code:	Country:			
Phone number in home country:				
8. Complete local address in the U.S	S. (if you are currently in the U.S. or know your future address):			
Street address:				
City:	State/Province:			
Postal/ZIP Code:	Country:			
U.S. Phone number:				
9. Are you applying for an F2 Dependent visa for your spouse and/or child? 🗖 Yes 📮 No				
EDUCATION INFORMATION				
1. Have you studied English for one year or more? ☐ Yes ☐ No				
2. Do you plan to transfer to the College of Marin Credit Degree Program after completion of IEP? 🖵 Yes 🖵 No				
a. If yes, what is your intended major (program of study)?				



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CURRENT STATUS (ONLY FOR STUDENTS CURRENTLY IN THE U.S.):				
1. Are you applying for a Change of Status to F1 from inside the U.S.? 🖵 Yes 🖵 No				
2. Do you currently have F1 status?				
3. If you currently have F1 status:				
a. Is your I-20 currently in good status? 📮 Yes				
☐ No, please explain:				
b. Which school are you currently attending?				
c. When did your program begin at your current scho	ol?			
d. What is your program end date?				
e. What is your SEVIS I-20 number?				
f. List the name of your DSO or contact person at you	current school:			
g. List contact information of your DSO or contact person at your current school:				
Phone:Emai	l:			
4. If you do not currently have F1 status, please list your	current visa or status type:			
EMERGENCY CONTACT INFORMATION:				
This information will remain on file for the duration of	your enrollment. Please report any changes to your DSO.			
1. Emergency contact person:				
2. Languages spoken:				
3. Address:				
4. Telephone number:	_ 5. Mobile number:			
6. Email:	_ 7. Relation to applicant:			



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GENERAL INFORMATION:				
1. How did you hear about COM? ☐ Family ☐ Friends ☐ Current/Former COM Student ☐ Agents ☐ Fair ☐ Other				
2. Are you currently working with an advising agency or agent? ☐ Yes ☐ No				
If yes, please list the following information:				
a. Name of Agency/Company:				
b. Name of Agent/Advisor:				
c. Please list the following information for your Agent/Agency:				
Contact email:				
Phone number:				
d. Signature from the agent listed above:				
ACKNOWLEDGEMENT:				
I hereby certify that the information set forth in this application is true to the best of my knowledge. If accepted to College of Marin, I hereby agree to abide by all the rules and regulations set forth by the College.				
Applicant Signature:Date:				



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F1 INTERNATIONAL STUDENT FINANCIAL AFFIDAVIT				
Family/Last name:				
Given/First name:				
Middle name:				
SOURCE(S) OF SUPPORT				
·				
□ I will pay for school with my personal funds. (Complete Section A) □ I will be sponsored by another individual, i.e. parents, family member, other sponsor from my home country. (Complete Section A)				
☐ I will be sponsored by another individual who is a legal permanent resident or U.S. citizen. (Complete Section A and B)				
☐ I will be sponsored by the government of my home country (Complete Section A)				
SECTION A				
I certify that I have the financial resources to cover all expenses named in this document while I am studying in the United States I understand that failure to include any information, including the official financial documents, will hinder processing of my application and issuance of the I-20. I understand that the inclusion of any false information concerning financial support could result in the termination of my SEVIS record and revocation of my F1 status.				
Applicant signature:Date:				
Sponsor name:Date:				
SECTION B				
Only complete this section if you are being sponsored by a legal permanent resident or United States citizen. I certify that I have read and fully understand the financial requirements of sponsorship. I further certify that I have the financial resources to cover all expenses of the student named in this document while s/he is in the United States. I understand that failure to include any information, including the official financial documents, will hinder processing of the student's application and issuance of the I-20. I understand that the inclusion of any false information concerning financial support could result in the termination of the student's SEVIS record.				
Name(s) of Sponsor(s):				
Sponsor Phone Number:				
Sponsor Address:				
I will be providing (check box below): NOTE: If housing and meals are provided to the student at no cost, the minimum financial support amount required is \$10,558 USD.				
☐ Financial Support ☐ Housing and Meals				
Sponsor Signature:Date:				



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INTERNATIONAL STUDENT PARENT/GUARDIAN FORM

College of Marin (COM) welcomes all international students to apply. To be considered for admissions at College of Marin, the age requirement for the applicant is 18 years or older. If the applicant is under the age of 18, the applicant must be a high school graduate. The parent/guardian of the applicant must complete this form which authorizes the applicant's participation in courses offered by College or Marin and authorizes the employees of College of Marin to obtain for the minor any immunizations, medical and/or dental treatments deemed necessary.

The Parent/Legal Guardian must also provide COM with the information of a guardian who is living in the U.S. and will be responsible for the applicant's personal well-being and legal matters during his/her study at COM. Please complete this form and return along with a copy of your child's high school diploma (and an official English translation if the original diploma is not in English) together with the application package to our office. Failure to provide a legal U.S. guardian and proof of high school completion or equivalent will result in the denial of your child's admission to College of Marin.

SECTION 1: STUDENT INFORMATION (PLEASE LEGIBLY PRINT ALL INFORMATION REQUESTED)				
NAME (as it appears on your passport)	Last Name/Family Name/Surname	First Name/Given Name	Middle Name	
EMAIL ADDRESS		Date of	Birth (MM/DD/YYYY)	
SECTION 2: U.S. GUARDIAN IN	NFORMATION (PLEASE ATTA	CH A COPY OF U.S. LE	GAL I.D. OR PASSPORT)	
NAME (as it appears on your passport)	Last Name/Family Name/Surname	First Name/Given Name	Middle Name	
US ADDRESS (number and street)				
CITY		STATE	ZIP CODE	
EMAIL ADDRESS		Relationship to Applican	nt .	
DATE OF BIRTH	HOME PHONE	CELL PHONE		
SECTION 3: PARENT/GUARDIAN	ACKNOWLEDGEMENT (Please	initial each line to acknow	vledge your understanding)	
I understand that College of friends or under the supervis	f Marin (COM) strongly recomme sion of a host family until they tur		e either with family or family	
I understand that the College has no legal responsibility for the care or wellbeing of the minor student wherever he or she chooses to live while in the U.S. attending COM.				
I authorize my child's participation in courses offered by COM and understand that my child is required to comply with the rules and regulation of COM.				
I understand that in the event that my child requires medical attention, I authorize the College of Marin's Public Safety and Student Health Departments to make decisions for my child on my behalf.				
I state that the information I am providing on this form is true.				
Parent/Guardian'sName:	Date of Birth (MM/YY/YYYY):			
Signature:		D	Pate:	
Relationship to Applicant:				