



International Student Application for Admission

Thank you for your interest in Lake Tahoe Community College. Please complete the entire application and provide all required documentation by the deadline for the quarter in which you plan to begin attendance.

Application Deadlines for Academic Year 2017/2018 *

Quarter	Application Deadline- New Students
Early Fall (athletes only)	June 10
Fall	August 10
Winter	November 20
Spring	March 10

Quarter	Application Deadline- Transfer students
Early Fall (athletes only)	July 10
Fall	September 7
Winter	January 2
Spring	April 2

* If you find yourself applying for admission after the application deadline contact the International Student Office to find out if any special arrangements can be made.

To be considered for admission, please submit all of the following documents by the application deadline:

- International Student Admission Application
- Copy of valid passport
- High School transcripts (translated into English)
- Evidence of English proficiency (see Information Packet and current catalog)
- Verification of ability to meet financial obligations (dated in recent 6 months)
- Evidence of physical examination (dated in recent 6 months)
- Results for Tuberculosis screening (dated in recent 6 months)
- Personal letter describing your interests, academic goals, and plans (**letter must be hand-signed**)
- \$100 **non-refundable** application fee

All documents **must be scanned and emailed** to International Student Office at mksternal@lcc.edu and received by Lake Tahoe Community College prior to the application deadlines. You will also be required to submit proof of medical insurance coverage prior to beginning your studies.

Refer to page three of the International Student Information packet or visit www.lcc.edu/international for further details about the requirements for each of the items listed above.

Send Completed Application Packet to:

International Student Office
Lake Tahoe Community College
One College Drive
South Lake Tahoe, CA 96150
United States

via email: mksternal@lcc.edu



Quarter of Application: Summer Fall Winter Spring Early Fall (student athletes only)

Last Name		First Name		Middle Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth (MM/DD/YYYY)	Student's phone number with country code			Student's email address	
Country of Citizenship			Country of Birth		
Legal/Permanent Address (Outside the U.S.)					
Street		City, County/State, Postal Code			Country
Mailing Address (Outside the U.S.)					
Street or P.O. Box		City, County/State, Postal Code			Country
Other Contact Information					
Parent/Guardian Name		Parent/Guardian phone number with country code		Parent/Guardian Email Address	
2 nd Emergency Contact Name		2 nd Emergency phone number with country code		2 nd Emergency Email Address	Relationship

Citizenship and Ethnicity																															
Citizenship <input type="checkbox"/> Request consideration for I-20 paperwork to allow application for a student visa (F-1) <input type="checkbox"/> Currently hold a student visa (F-1) and would like to transfer from another institution <input type="checkbox"/> Other status (please specify): _____		If you currently hold a student visa, which college or university issued your I-20? <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;">Date of Issue</td> <td style="width: 50%;">Expiration Date</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Date of Issue	Expiration Date																										
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Ethnicity (Mark All That Apply) <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Asian: Cambodian</td> <td><input type="checkbox"/> Central American</td> <td><input type="checkbox"/> Filipino</td> <td><input type="checkbox"/> American Indian</td> </tr> <tr> <td><input type="checkbox"/> Asian: Chinese</td> <td><input type="checkbox"/> Mexican, Chicano, or Mexican-American</td> <td><input type="checkbox"/> Pacific Islander: Guamanian</td> <td><input type="checkbox"/> Alaskan Native</td> </tr> <tr> <td><input type="checkbox"/> Asian: Japanese</td> <td><input type="checkbox"/> South American</td> <td><input type="checkbox"/> Pacific Islander: Hawaiian</td> <td><input type="checkbox"/> White Non-Hispanic</td> </tr> <tr> <td><input type="checkbox"/> Asian: Korean</td> <td><input type="checkbox"/> Hispanic: Other</td> <td><input type="checkbox"/> Pacific Islander: Samoan</td> <td><input type="checkbox"/> Other Non-White</td> </tr> <tr> <td><input type="checkbox"/> Asian: Laotian</td> <td></td> <td><input type="checkbox"/> Pacific Islander: Other</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Asian: Vietnamese</td> <td></td> <td><input type="checkbox"/> African-American Non-Hispanic</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Asian: Other</td> <td></td> <td></td> <td></td> </tr> </table>				<input type="checkbox"/> Asian: Cambodian	<input type="checkbox"/> Central American	<input type="checkbox"/> Filipino	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian: Chinese	<input type="checkbox"/> Mexican, Chicano, or Mexican-American	<input type="checkbox"/> Pacific Islander: Guamanian	<input type="checkbox"/> Alaskan Native	<input type="checkbox"/> Asian: Japanese	<input type="checkbox"/> South American	<input type="checkbox"/> Pacific Islander: Hawaiian	<input type="checkbox"/> White Non-Hispanic	<input type="checkbox"/> Asian: Korean	<input type="checkbox"/> Hispanic: Other	<input type="checkbox"/> Pacific Islander: Samoan	<input type="checkbox"/> Other Non-White	<input type="checkbox"/> Asian: Laotian		<input type="checkbox"/> Pacific Islander: Other		<input type="checkbox"/> Asian: Vietnamese		<input type="checkbox"/> African-American Non-Hispanic		<input type="checkbox"/> Asian: Other			
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Education	
Educational Goal: <input type="checkbox"/> Transfer to a 4-year college <u>with</u> an associate degree <input type="checkbox"/> Transfer to a 4-year college <u>without</u> an associate degree <input type="checkbox"/> Obtain a community college academic degree	Education Level (mark highest level completed) <input type="checkbox"/> Not a high school graduate and not enrolled in high school <input type="checkbox"/> Currently attending K-12 school <input type="checkbox"/> Currently enrolled in Adult School <input type="checkbox"/> Received high school diploma <input type="checkbox"/> Passed the GED or received a High School Certificate of Equivalency or Completion <input type="checkbox"/> Received a Certificate of California High School Proficiency <input type="checkbox"/> Received Foreign Secondary School Diploma/Certificate of Graduation <input type="checkbox"/> College graduate – received Associate Degree <input type="checkbox"/> College graduate – received Bachelor's Degree or higher
Enrollment Status <input type="checkbox"/> New – first time enrolled at any college in the US <input type="checkbox"/> Transfer – attended another college in the US previously <input type="checkbox"/> Other – current/former LTCC student or other status	

High Schools Attended

Name of High School	City, County/State, Country	From	To
Name of High School	City, County/State, Country	From	To

Colleges and Universities Attended

Name of College or University	City, County/State, Country	From	To
Name of College or University	City, County/State, Country	From	To
Name of College or University	City, County/State, Country	From	To

Academic Program/Major (Mark One)

Associate Degrees

- Addiction Studies
- Anthropology
- Art
- Art New Media
- Business (**MARK ONE:** Accounting Finance Management Marketing)
- Business Administration (and Transfer Degree)
- Commercial Music
- Computer and Information Sciences - Web Development
- Criminal Justice- Administration of Justice
- Culinary Arts
- Early Childhood Education
- Elementary Teacher Education
- English
- Environmental Technology and Sustainability
- Fire Science
- Geography
- Geology (and Transfer Degree)
- Humanities
- Kinesiology
- Liberal Arts (**MARK ONE:** Arts & Humanities Math & Science Social Sciences)
- Mathematics (and Transfer Degree)
- Medical Office Assistant – Administrative
- Natural Science
- Psychology
- Social Science
- Sociology (and Transfer Degree)
- Spanish
- Wilderness Education

Parents' Education Level (First Generation)	
Father: <input type="checkbox"/> High school diploma or GED <input type="checkbox"/> Some college, no degree <input type="checkbox"/> Associate degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's degree or higher <input type="checkbox"/> Other /Unknown	Mother: <input type="checkbox"/> High school diploma or GED <input type="checkbox"/> Some college, no degree <input type="checkbox"/> Associate degree <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Master's degree or higher <input type="checkbox"/> Other /Unknown

Other Questions	
Where did you find out about LTCC?	
<input type="checkbox"/> Google Search / Website <input type="checkbox"/> High School Counsellor <input type="checkbox"/> College or University Counsellor	<input type="checkbox"/> Social Media <input type="checkbox"/> College Fair <input type="checkbox"/> Other (please specify) _____

TRANSFER STUDENTS ONLY:

Local Residence Address (Within the U.S.)		
Street	City, State	Zip Code
Local Mailing Address (Within the U.S.)		
Street or P.O. Box	City, State	Zip Code
When would you like to start and end your attendance at LTCC?		
Starting quarter and year	Ending quarter and year	
Travel Plans		
Do you plan to leave the country prior to attending LTCC? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, when do you plan to leave and return?	

CERTIFICATION – TO BE READ AND SIGNED BY APPLICANT:

I declare under penalty of perjury that all information on this form is correct. I understand that falsification, withholding information, or failure to report a change in residence may result in my dismissal.

Student signature: _____ **Date:** _____

Office Use Only	ID# _____
<input type="checkbox"/> CAR <input type="checkbox"/> OSR <input checked="" type="checkbox"/> FCR <input type="checkbox"/> AB540 <input type="checkbox"/> GNP	



The non-refundable application processing fee of \$100 must be submitted with your admission application. This fee may be paid by check, money order, or cashier's check payable in U.S. funds or payment may be made by credit card (Visa, MasterCard, or Discover).

If you would like to pay by credit card, please complete the authorization form below.

Credit Card Credit Card Authorization

Student Name: _____

Cardholder's Name: _____

Telephone: _____

Credit Card: MasterCard Visa Discover

Card Number: _____

Expiration Date: _____ Verification code (3 digit numbers on back of card): _____

I hereby authorize Lake Tahoe Community College to charge my credit card in the amount of \$100.00 for the international student application fee.

Cardholder's Signature

Date



STATEMENT OF FINANCES

As an international student, you will be required to enroll in and complete at least 12 units per quarter (fall, winter and spring) of attendance. Non-resident tuition will be charged in addition to the enrollment fee. It is your responsibility to verify that you have sufficient funds available to cover all educational and living expenses identified in the International Student Information sheet (see page 4). International students are not eligible for financial aid. Indicate all financial amounts in U.S. dollars.

By signing this document, I certify that I will have a minimum of \$16,000 U.S. dollars for each year of my study at Lake Tahoe Community College exclusive of travel expenses.

1. Please indicate the source and amount of funds:

<u>Source:</u>	<u>Amount: 1st Year</u>	<u>Amount: 2nd Year</u>
* Personal Fund of the Student	\$ _____	\$ _____
* Family Funds	\$ _____	\$ _____
* Government Scholarship	\$ _____	\$ _____
* Other Sources of Funding	\$ _____	\$ _____

* Must provide verification for first year only - notarized statements from bank officials and or government agencies (see page 6)

2. Will your government allow money to be sent directly to you? Yes No *If yes, explain the procedure you must follow to receive this money: _____

I certify that the information provided above is true, correct and complete. I understand that misrepresentation of information will be a cause for dismissal from Lake Tahoe Community College.

(Student's name as it appears on your passport)

(Student's signature)

(Date)

AFFIDAVIT OF SUPPORT

If you agree to sponsor an international student, you must certify that you have the financial means to meet the financial obligations listed in the International Student Information sheet. Financial documentation is required for admission and necessary immigration forms. Please complete the information below. Indicate all financial amounts in U.S. dollars.

Name of student: _____

Name of sponsor(s): _____

Residence address: _____

Telephone and e-mail: _____

Relationship to student: Parent Other Relative Friend Other: _____

I hereby certify that I am willing to support the student listed above by providing United States funds in the amount of \$_____ per year of attendance. I understand that bank verification of funds may be required of either the student or sponsor.

Sponsor's Signature: _____

Date: _____



Bank Certification

To the applicant, parent or sponsor: Please present this form to your bank or financial institution.

Name of student: _____

TO BE COMPLETED BY BANK OR OTHER FINANCIAL AGENCY OFFICIALS

We hereby certify the following information regarding the account held by:

Name of account holder: _____

Date account opened: _____

Present balance in U.S. dollars: \$_____

Comments: _____

Name of bank or agency: _____

Official's signature: _____ Date: _____

Official's name and title: _____

Address of bank or agency: _____

Bank or agency stamp:



International Admissions - Physical Examination & Tuberculosis Clearance

Dear Medical Professional:

The individual providing this form has applied for admission to Lake Tahoe Community College in the US, as an international student. One of the admission requirements is a physical examination to determine whether the potential student is in good health and Tuberculosis screening. The applicant is expected to pay any necessary fees to the medical facility for this exam. Please provide your evaluation below.

Name of Applicant/Patient: _____

Applicant's Date of Birth: _____

Date of Exam: _____

Based on your evaluation, is the applicant in good health? Yes No

To your knowledge, is the applicant free of any infectious and contagious diseases? Yes No

To your knowledge, is the applicant free from any pathology incompatible with group life? Yes No

Are there any special instructions regarding the health of this individual? Yes No

Comments: _____

Tuberculosis screening- all international students are required by the Department of Public Health to have a current (recent 6 months) Tuberculosis (TB) clearance (skin test PPD, blood test or chest x-ray) prior to admittance to college.

Please use separate document for statement of Tuberculosis screening.

Signature of Physician or Public Health Officer Date

Name of Physician and Address of Facility

Physician's or Facility's stamp

Applicants- please return completed form to:

Lake Tahoe Community College
International Student Office
One College Drive
South Lake Tahoe, CA, 96150

Email: mksternal@ltcc.edu



International Student Mailing Information

Please fill out the following label. It will be used for mailing your immigration documents via FedEx. Be sure to provide the most accurate address and phone number to ensure FedEx can reach you and deliver your package.

Name: _____

Address: _____

Address: _____

City: _____

State / Province / Region: _____

ZIP / Postal Code: _____

Country: _____

Telephone with country code: _____