

Application for Full-Time International Students (I-20 Form)

Name:	family name / last na	nme given name / first name				
	Country of birth:	Country of Citizenship:				
Gender (please chec	$ck one$): \square Male \square Female					
Phone:		Email:				
Home Address in N	ative Country:					
Local US Address: _						
	street	city/state	postal code			
Signature:		Date of application	nonth/dav/year			
Admission Rec	quest (please check one): \Box Fall \Box	Spring Summer I Summer II	montn/day/year			
I-20 Request (for F-1 Student Visa)					
I am applying as a:	(please check one)					
1. New Stude	ent for the English Language Institute (or	nly for ELI) - Applying from overseas .				
2. Transfer St	2. Transfer Student - Transferring from another school to the English Language Institute of Queens College.					
3. New Stude	ent - Requesting a change of status.					
Receiving your	r I-20 (please check one): Will pick	k up Mail overseas Mail Locally				

Application for Full-Time International Students (I-20 Form) (continued)

Type of	Financia	l Sunno	rt Inforn	nation (1	nlease che	ck one	hor).
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	1. Student's own original official bank statement on letterhead in English and in US dollars.*
	2. Sponsor form overseas <u>affidavit of support</u> . 2. Original bank statement on letterhead in English and in US dollars.*
	3. US sponsor's <u>affidavit of support.</u> 2. Original bank statement on letterhead in English. 3. Proof of income.
*An	official document of monthly account activity, including account number, balance, deposit & withdrawls.

Enclose Payment: Application fee of \$150. Check or money order made out to "Queens College." No cash please.

Submit all of the following:

- 1. This completed application.
- 2. An \$150 check or money order.
- 3. A copy of your passport.
- 4. Your financial support information.*
- 5. If you are under 18 years old, a copy of your high school diploma or university records.

English Language Institute Visa Office at Queens College Kissena Hall, Room 100, 65-30 Kissena Boulevard, Queens, New York, 11367-1597 USA TEL: 718-997-5720 FAX: 718-997-5723 EMAIL: ELI@qc.cuny.edu



^{*} You can use either the <u>ELI affidavit of support</u> OR form <u>I-134</u>.