



(559) 934-2000 | 300 Cherry Lane Coalinga, CA 93210 | www.coalingacollege.edu

International Student Application

NON-REFUNDABLE PROCESSING FEE OF \$50 - Deadline to Apply July 15 - Fall Semester & November 15 - Spring Semester

Please complete all sections of this application and return it with the required documents to the above address.

Name _____
Last (family name) First Middle

Address _____
Street Name and Number City Country Postal Code

Telephone Number _____ E-Mail Address _____

Male Female
Date of Birth _____ Country of Citizenship _____
Day Month Year

Decline to State Country of Birth _____

Citizenship Status (mark one)

US Citizen

Not a US Citizen

Permanent Resident (Immigrant Visa)

Temporary Resident/Amnesty

Refugee/Asylum

Student Visa

Other Status

Semester Applying Fall Spring Summer 20 ____

Is English your Primary Language?

Yes No

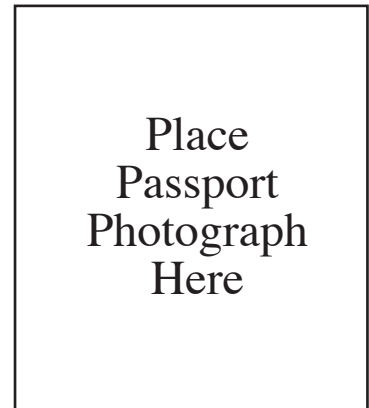
If English is not your primary language please indicate your fluency.

Fluent Conversational Limited No exposure to English language

Education

| Name of School | Location | Dates of Attendance | Degree |
|----------------|----------|---------------------|--------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Indicate the course of study you would like to pursue at Coalinga College _____



Enrollment Status

- First-time student. A student enrolling in any college for the first time
- First-time transfer student. A student enrolling at this college for the first time and who is transferring from another college after earning credit.
- Returning transfer student. A student who has previously attended this college, transferred to another college, and is now returning to this college.
- Returning student. A student enrolling at this college after one or more semesters without interim attendance at another college.

Principal Educational Goal

Select your highest priority (Mark one)

- | | | |
|--|--|---|
| <input type="checkbox"/> Obtain BA/BS after earning degree (AA/AS) | <input type="checkbox"/> Earn a vocational certificate without transfer | <input type="checkbox"/> Personal enrichment/personal interest/personal development |
| <input type="checkbox"/> Obtain BA/BS without earning degree (AA/AS) | <input type="checkbox"/> Discover formulate career interest, plans, goals. | <input type="checkbox"/> Improve basic skills in English, Math and or Reading |
| <input type="checkbox"/> Obtain community college degree without transfer | <input type="checkbox"/> Prepare for new career | <input type="checkbox"/> Complete credits for high school diploma or GED |
| <input type="checkbox"/> Obtain community vocational degree without transfer | <input type="checkbox"/> Progress further in current Job/career | <input type="checkbox"/> Undecided on goal |
| | <input type="checkbox"/> Maintain certificate or License | |

Family Education and Privacy Act

The college receives inquiries from a variety of persons and agencies requesting directory information. This includes name, address, telephone, major, dates of attendance, degrees and awards earned, participation in official college activities and sports. Do you authorize the release of this directory information? Yes No

Emergency Contact

Please list an English-speaking emergency contact that can make decisions should there be a medical or other emergency (a person who lives in the U.S. would be best). Housing arrangements will not be made without this information.

Name _____

Address _____

Telephone (including country code) _____

Please have parent or guardian (if student is under 18 years of age) sign below for emergency medical treatment.

Signature of parent or guardian

Date

This application will not be processed unless all questions are answered

I certify that the above information is true and correct and I hereby authorize Coalinga College to verify the information I have provided.

I understand that all requirements must be on file by the deadline established for each semester and certify under penalty of perjury that the information given on this form is true and correct. I understand that failure to report changes in status can result in dismissal from college.

Student Signature

Date

