

# UNIVERSITY OF CALIFORNIA EXTENSION

BERKELEY DAVIS **IRVINE** LOS ANGELES RIVERSIDE SAN DIEGO SAN FRANCISCO

SANTA BARBARA SANTA CRUZ



## English & Certificates for Internationals University of California Irvine, Extension

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Irvine, CA 92616-6050 U.S.A.

## Enrollment Application for International Undergraduate Preparation Program

### 1-PERSONAL INFORMATION

Please **TYPE** or neatly and clearly **PRINT** your name **EXACTLY** as it appears on your passport.

Family/Last Name: \_\_\_\_\_

Given/First Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_

Male  Female

Country of Birth: \_\_\_\_\_

Date of Birth (month/day/year): \_\_\_\_/\_\_\_\_/\_\_\_\_

Country of Citizenship: \_\_\_\_\_ - \_\_\_\_\_

Name of High School: \_\_\_\_\_

Date of High School Graduation: \_\_\_\_\_

High School Grade Point Average (GPA): \_\_\_\_\_ - \_\_\_\_\_

TOEFL/TOEIC/IELTS Score: \_\_\_\_\_ - \_\_\_\_\_

### 2 - Permanent Address

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

\_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Home Tel: \_\_\_\_\_ Fax: \_\_\_\_\_

Cellular/Mobile Tel: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### 3- PROGRAM PREFERENCE

Check the appropriate boxes to indicate your preference for attendance dates and duration of preparation program.

#### Starting Year:

2010

2011

2012

#### Starting Quarter:

Winter (January)

Spring (April)

Summer (June)

Fall (September)

### 4- HOUSING

Students must have the University Apartment for the first quarter of IUPP (the Housing Program includes the One-Week Homestay Welcome Program)

University Apartment

Agent's e-mail if applicable: \_\_\_\_\_

### 5- VISA INFORMATION

**Do you need an I-20 to study in the U.S.?**

Yes. Are you transferring from a school in the U.S.A.?

No.  Yes.

If you are a transfer student, will you be leaving the U.S.A. before starting our program?  No.  Yes.

No. What is your visa status (e.g., F-1)? \_\_\_\_\_

### 6- HEALTH INSURANCE

Students must have health and liability insurance. UC Health insurance is included in the program fee of IUPP.

I understand and agree to the above.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## 7- FINANCIAL INFORMATION

Submit a bank-certified financial statement on official bank letterhead to prove that you have sufficient funds to cover tuition, living and other expenses during the period of study in the program. Alternatively, you may have a Bank Official complete the "Certification by Bank Official" below. All funds must be stated in **U.S. dollars**, and the statement must be dated within three months of the date when the application is received and be for liquid assets, i.e., funds which are immediately available.

- A Bank Official has completed the official certification below.**
- I am Enclosing a financial statement.**

### Certification by Bank Official

Funds are available for the most expensive preference : Yes / No
Name of Account Holder:
Name of Bank:
Bank location (city and country):
Name of Bank Official:
Title of Bank Official:
Bank Official's Signature:
Date(within 90 days of application date):

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Official Bank Seal/Stamp

### STATEMENT OF FINANCIAL SUPPORT:

The person who is financially responsible for you must read and sign the statement below. If you are financially responsible for yourself, you may sign the statement yourself.

Name of Person/Organization Financially Responsible :
Relationship to Student :
Signature:
Date:

*"I have read the information regarding the cost of tuition and living expenses for the period of study in the program. I certify that these funds are available, and I accept full responsibility for these expenses."*

## 8-EDUCATIONAL AGENCY INFORMATION

**(For agency only)**

Name of Agency :
Address :
Telephone Number <i>(required)</i> :
E-mail <i>(required)</i> :

### Important

For sponsored students: Our office receives requests from your agent/representative to release your financial and academic records to them. Under University policy, your written consent is required to release this information to a third party. By signing below, you authorize the release of the above information.

### Student's Signature

For more information regarding the privacy of your student record, please visit [http://www.reg.uci.edu/facnet/student\\_records.html](http://www.reg.uci.edu/facnet/student_records.html).

## 9-PAYMENT PROCEDURE

To apply, enclose the following non-refundable payment with your application.

- Enrollment Application Fee (required).....150.00 USD

### Method of Payment

I would like to pay by credit card:

- Master Card
- Visa

Credit Card Number:
Cardholder's Name:
Expiration Date:
Authorizing Signature

## 10-STUDENT SIGNATURE

*"I certify that the information I have provided on this application is true and correct to the best of my knowledge."*

Print name here: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_