

International Student Application

We are pleased that you are considering Portland Community College

to further your education. This application and checklist should give you the basic information you need for admission to our college. PCC is a multi-campus college with centers in various locations around the Portland, Oregon area. Our main campuses include Cascade, Rock Creek, Southeast Center, and Sylvania. Each campus is approximately 15-20 minutes from downtown Portland. For more information please visit our website at www.pcc.edu.

Admissions Checklist

Please submit the following:

- International Application form completed and signed by the applicant.
- \$50 non-refundable Application Fee. Enclose a check or money order payable to "Portland Community College," or provide credit card information.
- Official academic transcripts from high schools, other colleges, or universities.
- Evidence of financial resources
Submit current bank statement or a bank letter showing adequate financial support for at least your first year of study at Portland Community College (\$18,000). All documents must be in English and cannot be older than six months at the time of application. Funds may be either in US dollars or your country's currency.
- Completed Statement of Financial Responsibility form.

Transfer Students

If you are a student transferring to PCC from another school in the U.S. please also submit the following:

- Photocopies of current I-20 form, U.S. visa, I-94, and passport photo page.
- Completed SEVIS Transfer Form

Mail, bring, or fax your completed application packet to:

**Portland Community College
Office of International Education**

Rock Creek Campus
17705 NW Springville Road,
Portland, OR 97229 USA
Fax: 503-614-7170

Questions

Call or email the International Education Office or
check our website at: www.pcc.edu/international

Phone: 503-614-7150

Email: international@pcc.edu



We're all about
your future.

Personal Information

Name (as printed in passport):

Last/Family Name _____ First Name _____ Middle Name _____

Email Address (required) _____ Current Telephone Number _____

Country of Birth _____ Country of Citizenship _____

Social Security Number or PCC ID Number _____ Date of Birth (mm/dd/yyyy) _____ Male Female

Important Under P.L. 93-579, Sec. 7(a)(1), disclosure of a Social Security Number is voluntary. It is used for identification purposes only. If you object to the use of the Social Security number, an alternative ID number will be issued by PCC.

Marital Status: Married Single Will Dependents Accompany you to the US? Yes (List Family Members Below) No

Family Name _____ First Name _____ Middle _____ Birthdate _____

Country of Birth _____ Male Female Relationship _____

Family Name _____ First Name _____ Middle _____ Birthdate _____

Country of Birth _____ Male Female Relationship _____

Family Name _____ First Name _____ Middle _____ Birthdate _____

Country of Birth _____ Male Female Relationship _____

U.S. Mailing Address (address within the U.S. if you have one):

Number and Street _____ Apt # _____ City _____ State _____ Postal Code _____

Telephone Number _____ Email Address (required) _____

Home Country Mailing Address (required):

Are you currently residing in the U.S.? Yes No

If yes, what is your immigration status? F-1 Other (specify): _____
 No Visa (outside USA)

Visa Expiration Date (mm/dd/yyyy): _____

Have you previously attended PCC?

Yes (when?) _____ No
 I will be a new PCC student
 I have applied to PCC before

Term you plan to begin:

Summer (June), 20____ Winter (January), 20____
 Fall (September), 20____ Spring (April), 20____

Where would you like your I-20 and acceptance packet sent?

Home country mailing address U.S. mailing address
 Agency/Advising Center
 Will be picked up by: _____
(name and relationship to you)

Person to be notified in case of an emergency (either in the U.S. or abroad):

Name _____ Relationship to you _____

Address _____ Telephone number _____

How did you hear about Portland Community College?

Web Site _____ Embassy
 Agency Name: _____ Friend or relative Name: _____ Education Fair Month/Year: _____
 Language School: _____ Study in the USA website: _____

Education

Will you have completed secondary/high school before starting your program at Portland Community College? Yes No

If yes, please provide the date of your actual or estimated high school graduation: _____ Have you attended a school in the US Yes No

If you are currently studying at a school in the US, do you plan to leave the US before starting your program at PCC? Yes No

List all previous secondary/high schools, colleges, universities and ESL programs attended. **Begin with most recent.**

Name of school	Location	Attendance period		Graduated When?
		From	Until	
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Intended major area of study: _____

What is your educational goal at PCC?

- Intensive English Program
- 2 year degree program

English Proficiency

No proof of English proficiency or TOEFL score is required. After arriving at PCC, you will have to take an English language placement test. The results of this test will determine your placement in appropriate courses. Based on test results, you may be required to take classes in the Intensive English Program. Please contact International Admissions regarding English Placement test requirements if you have successfully completed a college level writing class at another institution in the U.S.

Health Insurance

All students are required to have health insurance for the duration of their study at PCC. Students are required to purchase health insurance through PCC.

Signature

I hereby certify that the information I have provided is accurate and complete to the best of my knowledge and that failure to disclose and submit complete and accurate information and all required documents may result in denial of admission or dismissal from the College.

Signature: _____ Date: _____

Name (please print): _____

Application Fee

\$50 Application fee (non-refundable) is enclosed \$50 Express mail fee (*non-refundable) is enclosed

Paid by: Check payable to PCC Money order Visa MasterCard

Card number: _____ Expiration date: _____

Cardholder name (as it appears on your card): _____ Cardholder signature: _____

Total charge amount (you must select one): \$50 (application fee) \$50 express mail fee \$100 (both)

Statement of Financial Responsibility

A Required Financial Resources

	Academic Year (9 months)	One Term (3 months)
Tuition and Fees*	\$7,500	\$2,500
Books and Supplies	\$900	\$300
Medical Insurance	\$600	\$200
Transportation	\$600	\$200
Food and Lodging**	\$6,300	\$2,100
Personal Expenses	\$2,100	\$700
Total	\$18,000	\$6,000

* Tuition and Fees are subject to change.

**Estimates expenses, actual expenses may vary

Students with dependents:

Additional \$2,500 per child and \$3,500 per spouse should be added to the above total.

B To be completed by the applicant

SOURCE OF FINANCIAL SUPPORT:

Please check one or more sources of financial support listed below.

- Personal Funds (account in applicant's name) \$ _____
 - Family funds \$ _____
Family member must complete Section C of this form
 - Funds from a sponsor (not a family member) \$ _____
Sponsor must complete Section C of this form
 - Funds from scholarship or government sponsor \$ _____
- TOTAL** \$ _____

If you have **personal funds, family funds, or funds from a sponsor** you must submit an official bank letter or bank account statement showing sufficient balance.

If you have a **scholarship or another government sponsor** you must attach a copy of your award letter or billing authorization.

I certify that the stated funds are available for my educational expenses at PCC. I will notify PCC of any changes in my financial situation.

Student Signature _____ Date _____

C To be completed by the applicant's sponsor (if applicable)

STATEMENT OF FINANCIAL SUPPORT

Name of Sponsor _____

Name of Student _____

Relationship to student _____

Address of sponsor _____

Phone: _____ Email: _____

I certify that I am willing and able to provide \$ _____ (U.S. Dollars) each year for educational and living expenses of the above named student for the duration of his/her academic study at PCC. Official documentation of my financial resources is attached to this statement. I will notify PCC immediately if at any time I must discontinue providing for the educational and/or living expenses of this student.

Signature of Sponsor _____ Date _____

Financial Responsibility Statement