

THIS PACKET INCLUDES THE FOLLOWING:

- 1) Pasco-Hernando State College (PHSC) application
- 2) Information for Non-Immigrant (F/M) Students:
 - New/Transfer student admission checklist
- 3) Guide for Non-Immigrant (F/M) Students
- 4) Form I-134, Affidavit of Support (for students sponsored by a U.S. citizen or Permanent U.S. resident – if applicable)
- 5) About the TOEFL test (web address for TOEFL information):
 - <http://www.ets.org/toefl>
- 6) List of Foreign Credentials Evaluators
 - Website address: <http://www.naces.org/members.html>
- 7) Required Health/Accident Insurance List
- 8) Certificate of Compliance Form
- 9) F-1 Transfer Eligibility (Visa Clearance) Form – For students transferring to PHSC

Please ensure that all required documentation has been submitted. Incomplete application packets will not be reviewed and will be returned to the applicant.

Additional information is available by going to the PHSC website:
<https://admissions.phsc.edu/getting-started/international-students>

APPLICANT INFORMATION—PLEASE PRINT

| OFFICE USE ONLY | |
|-----------------|-------|
| APP 1 | _____ |
| SLOC | _____ |
| DT-APP | _____ |
| DT-OR | _____ |
| DT-WEB | _____ |
| NOAPB | _____ |
| D / ND | _____ |

1. U.S. Social Security Number: - -

2. Legal Name: _____
Last first Middle

3. Previous Last Name: _____

4. Local Mailing Address: _____
Number & Street (including Apartment #) City State Zip Code

5. Permanent Address: _____
(if different from above) Number & Street City State Zip Code

6. Telephone Numbers: (_____) _____ (_____) _____
Primary Other

7. E-mail Address: _____

8. Birth Date: ____/____/____ 9. Gender: Male Female
MM DD YYYY

10. Race: Are you Hispanic? No Yes Not Reporting
Check all that apply: White Asian/East Indian Black/African American
 Native American/Indian Native Hawaiian/Pacific Islander

11. Does your mother/guardian have a bachelor's degree? Yes No Unsure/Not answered

12. Does your father/guardian have a bachelor's degree? Yes No Unsure/Not answered

13. Are you a citizen of the United States? Yes No

If NO, indicate your country of birth: _____ Citizenship: _____

USCIS Status: Alien Resident Number: _____
(Attach a copy of your Alien Residency Card.)

Non-Resident of U.S. Visa Type: _____ Expiration Date: _____
(Attach a copy of your Passport and I-94 Card.)

14. Is a language other than English your native (first) language? Yes No

15. Do you plan to apply for Veteran's Educational Benefits? Yes No

ENROLLMENT PLANS

1. Check the term and indicate the year you plan to begin your enrollment at PHCC:

Fall (August) Yr: _____ Spring (January) Yr: _____ Summer (May) Yr: _____

2. If you plan to enroll in a degree or certificate program, complete the following:

Associate in Arts (AA) Degree Associate in Science (AS) Degree Associate in Applied Science (AAS) Degree
 College Credit Certificate Advanced Technical Certificate Applied Technology Diploma Technical Credit Certificate

If other than AA, which planned program? _____

Please review the Programs of Study sheet on page 2.

3. Indicate your enrollment classification:

Degree or Certificate Seeking Only:

- N: New (first time in any college)
- T: Transfer from Florida (previous attendance at any FL college/university)
- TO: Transfer from outside Florida (previous attendance at any college/university)
- P: Post-baccalaureate (earned bachelor's degree or higher)

Non-degree/Non-certificate Seeking Only:

- S: Special Student (limited to 15 hours). (SPOPO-XX)
- R: Transient (enrolled at another institution-must provide original transient form). (TRANS XX)
- P: Post-baccalaureate (earned bachelor's degree or higher). (NDOPO-XX)
- P: Teacher Recertification. (SPCRT-XX)

| OFFICE USE ONLY | |
|-----------------|-------|
| TERM | _____ |
| PROG | _____ |
| ENRL | _____ |
| HS CODE | _____ |
| GED CODE | _____ |

EDUCATIONAL BACKGROUND

1. If you graduated/will graduate from high school, indicate:

_____ Name of High School _____ City, State _____ Graduation Date (MM/YYYY)

If you graduated from a Florida public high school, please indicate the type of diploma/certificate:

- Standard Diploma Certificate of Completion IB Diploma Special Diploma*

*Special Diploma graduates are not eligible for admission to degree, college credit certificate, applied technology diploma or most limited access programs.

2. If you did not graduate from high school, but earned a GED diploma, please complete the following:

_____ GED Testing Agency _____ City, State _____ Diploma Issue Date (MM/YYYY)

3. List in chronological order all colleges/universities you attended previously. If none, write "NONE."

| NAME OF INSTITUTION | CITY STATE | DATES ATTENDED | | DEGREE EARNED |
|---------------------|------------|----------------|----|---------------|
| | | FROM | TO | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Applicant Certification: I certify that the answers given herein are true and correct to the best of my knowledge. I agree that, if accepted, I will abide by all rules, regulations and policies of the College, now and hereafter adopted, as set forth in the District Board of Trustees Rules and as published in the College catalog. I understand that falsification of information in any admissions document is grounds for denial of admission and may result in dismissal from the College. I hereby give permission to PHCC to photograph me and publish such photos in any PHCC advertising media, including videotapes, slides, printed publications and any other media form, for all of the uses permitted by Florida Statute. I also agree to the release of any transcripts and/or test scores to be sent electronically to or from PHCC to other educational institutions as needed for educational purposes.

Applicant's Signature _____ Date: _____

Information for Non-Immigrant (F/M) Students

New Student Admission Checklist

The items listed below are required for admission to the College. **Incomplete application packets will not be accepted.** The checklist will assist you in gathering the required information for admission to PHSC as an International Student. Items 1 through 4 must be completed, received and approved by the College, prior to the completion of any immigration paper work.

1. Submitted a completed PHSC Application with the required non-refundable application fee of \$40.00 payable to PHSC. Applied to one of the following programs: Associate in Arts, Associate in Science or Associate in Applied Science degree programs. **Note:** Certificate Programs listed in the PHSC Catalog are not acceptable by our government for students on M student visa.

2. Submitted proof of TOEFL scores if I am from a country whose native language is not English to show English proficiency. Send scores to PHCC's report code 5559. PHSC requires a test score of at least 523 on the paper version, 193 on the computer version or 69 on the Internet-based test (iBT).

Exceptions to this rule are as follows:

- _ The student earned a college preparatory American high school diploma or GED in English.
- _ The student successfully completed an Intensive English Program from a U.S. college or university or from one of the ELS Language Centers at level nine.
- _ The student successfully completed an associate degree or higher from a U.S. college or university.

3. Sent final transcripts (record of courses, marks earned and examination results) verifying graduation from high school which is equivalent to graduation from a U.S. high school with a standard diploma. The high school transcript has been evaluated by a credentials evaluation agency (see enclosed list of evaluation agencies). The result of this evaluation has been sent directly to the Office of Admissions & Student Records from the evaluation agency.

4. Submitted a notarized financial statement in U.S. dollars (on the financial institution's letterhead) showing a minimum of \$23,515.00 on deposit for the past six months prior to enrolling at PHSC **and** a letter from my financial sponsor indicating that he/she will be responsible for my expenses during my duration of study at the College. If there is a US sponsor (US citizen or US resident alien) for a portion or all of the funding, a US Immigration form I-134 "Affidavit of Support" will be required along with a supporting letter from the financial institution on their letterhead. This documentation must be dated within six months of the term planned to enroll at PHSC.

Item #5 listed below is required for all students (New and Transfers) before registering for any classes and may be submitted with the required documents listed above. However, if you are unable to submit the information listed below prior to coming to the US, you must submit the information after you arrive in the local area.

5. Submitted the required "CERTIFICATE OF COMPLIANCE" for Health/Accident Insurance valid for a minimum of one year, showing proof of the effective and expiration dates.

Transferring Non-Immigrant (F) Student from an Institution within the US to PHSC Checklist:

6. In addition to the above documents, I have submitted final official post secondary (college transcripts) of institutions attended within the United States.

7. Submitted Visa Clearance Form

- Provided the following originals to the college so that copies can be made and placed in my student file:
- I-94 card, front and back
- F-1 visa
- Passport indicating that it is valid for a minimum of six months after the term begins.

***All students (New and Transfers) must submit a Certificate of Compliance form (proof of Health/Accidental coverage).**

****Students may bring in or mail in the packet with all the required documentation to apply for admission to PHSC as a non-immigrant student. All documentation must be provided as one entire, completed packet to the New Port Richey campus by the published deadline date for the term you plan to enroll. Partial packets are not accepted.**

Entrance Terms

Fall (August)

Spring (January)

Summer (May)

Deadline Dates

June 15th

November 1st

March 15th

Pasco-Hernando State College
Guide for Non-Immigrant (F/M) Students

Students from a foreign country who plan to attend Pasco-Hernando State College must furnish all of the following documents before being admitted to the college:

1. A PHSC Admissions application with a non-refundable fee of \$40.00.
2. Non-immigrant (F/M) students must show proficiency of the English language; therefore, all non-immigrant (F/M) students whose native language is not English, must score at least 523 on the paper version, or a 69 on the Internet-Based (iBT) of the Test of Foreign Language (TOEFL). The college's score report code is 5559.
3. A certified English evaluation of high school and post secondary transcripts from one of the evaluation services recognized by the National Association for Foreign Student Advisors (NAFSA). See packet listing of current NACES evaluation services.
 - A document-by-document evaluation is required for a high school transcript. Students seeking transfer credits for courses taken at a university outside of the US must submit official transcripts from all postsecondary institutions attended. These transcripts must have a course-by-course evaluation completed by a credential evaluation service. The applicant assumes the expense for all evaluations. The post secondary evaluation must include the college name, years in attendance separated by semesters and the course prefix and course numbers and course name (ex: ABC University; 1st semester 1997, 2nd semester 1997; ENG1XXX-English writing).
4. Non-immigrant (F/M) students must provide proof that they have sufficient funds to cover college tuition and fees, textbooks and supplies, room and board, transportation, health insurance and personal incidental expenses while attending college within the US. The current cost for tuition is \$393.05* per credit hour. The estimated expenses for one academic year are:

| | | |
|----------------------|-------------------|--|
| Tuition & Fees | \$11800.00* | 30 credits per academic year (full-time) |
| Books & Supplies | \$ 1400.00 | |
| Room & Board | \$ 5540.00 | |
| Transportation | \$ 2018.00 | |
| Personal incidentals | \$ 1757.00 | |
| Health Insurance | <u>\$ 1000.00</u> | |
| | \$23,515.00 | |

***Fees listed above are subject to change without prior notice**

5. Provide proof of health insurance, which must be valid for one year. Proof of insurance is required for each year of enrollment and must be in English. Students who need health insurance may contact an insurance company from the list provided in the packet. Be advised that this list is provided as a courtesy and

does not indicate a recommendation on the part of the college. The approximate cost of health insurance for one year is \$1000.00 and should be included in your total estimated expenses for the year.

6. If a non-immigrant (F/M) student is attending or has previously attended a school in the United States, he/she must have the International Student Advisor at the previously attended school complete the enclosed Visa Clearance Form.
7. The originals of the following documents must be provided to the college so that copies can be made and placed in your student file:
 - I-20
 - I-94 card
 - F-1 visa
 - Valid passport indicating a minimum of six months after the term begins

The completed packet should be furnished by the published deadline date for the term that you plan to enroll. This allows time for the student to complete the PHSC placement test and to meet with an academic advisor prior to registering for courses. The academic advisor will help the student select courses dependent upon student interest, prior educational training, and course pre-requisites. Incomplete packets will be returned to the student.

Full-Time Enrollment

Non-immigrant (F/M) students on visas are required by the US Immigration and Customs Enforcement regulations to be enrolled on a full-time basis. PHSC offers three terms – Fall Term (August), Spring Term (January), and Summer Term (May).

A non-immigrant (F/M) student must be enrolled in two of the three terms. A student may take one term off per academic year.

Employment

All students on an F-1 visa are permitted to work only on campus. If there is campus employment available, the student is eligible to work a maximum of 20 hours per week. If you are experiencing severe economic hardship, you may apply for an off campus work permit. The student needs to be attending classes, be in good academic standing for one academic year, and provide proof of economic hardship.

****Students working off campus without permission from the U S Immigration and Customs Enforcement could be deported to their home country and possibly barred from the US for life.**

Housing

All prospective students who do not have a place to live in the local area must find housing. As a community college, PHSC does not provide housing for any of its students on or off campus. Students who wish to wait until they arrive to find

housing will need to make arrangements to stay with family or friends who live in the local area or stay in a local hotel.

You may enter the US up to 30 days prior to the start of classes: to find a place to reside, familiarize yourself with the area, meet with a PHSC advisor for placement testing, orientation and register for classes.

Deadline Dates

Entrance Terms

Deadline Dates

Fall (August)

June 15th

Spring (January)

November 1st

Summer (May)

March 15th

NOTE: Immigration laws are frequently revised. A non-immigrant student is responsible for becoming knowledgeable about immigration laws and stays informed regarding any changes. This information is available at the consulate in each country (www.ice.gov/graphics/sevis/index.htm).

Form I-134, Affidavit of Support

(Answer all items. Type or print in black ink.)

I, _____, residing at _____,
(Name) (Street Number and Name)
 _____,
(City) (State) (Zip Code if in U.S.) (Country)

certify under penalty of perjury under U.S. law, that:

1. I was born on _____ in _____, _____, _____
(Date [mm/dd/yyyy]) (City) (State) (Country)

If you are not a U.S. citizen based on your birth in the United States, or a non-citizen U.S. national based on your birth in American Samoa (including Swains Island), answer the following as appropriate:

- a. If a U.S. citizen through naturalization, give Certificate of Naturalization number _____
- b. If a U.S. citizen through parent(s) or marriage, give Certificate of Citizenship number _____
- c. If U.S. citizenship was derived by some other method, **attach a statement of explanation.** _____
- d. If a Lawful Permanent Resident of the United States, give A-Number _____
- e. If a lawfully admitted nonimmigrant, give Form I-94, Arrival-Departure Record, number _____

2. I am _____ years of age and have resided in the United States since _____
(Date [mm/dd/yyyy])

3. This affidavit is executed on behalf of the following person:
 Name (Family Name) _____ (First Name) _____ (Middle Name) _____ Gender _____ Age _____

| | | |
|----------------------|----------------|-------------------------|
| Citizen of (Country) | Marital Status | Relationship to Sponsor |
|----------------------|----------------|-------------------------|

| | | | |
|---|--------|---------|-----------|
| Presently resides at (Street Number and Name) | (City) | (State) | (Country) |
|---|--------|---------|-----------|

| Name of spouse and children accompanying or following to join person: | | | | | |
|---|--------|-----|-------|--------|-----|
| Spouse | Gender | Age | Child | Gender | Age |
| Child | Gender | Age | Child | Gender | Age |
| Child | Gender | Age | Child | Gender | Age |

- 4. This affidavit is made by me for the purpose of assuring the U.S. Government that the person(s) named in **item (3)** will not become a public charge in the United States.
- 5. I am willing and able to receive, maintain, and support the person(s) named in **item 3**. I am ready and willing to deposit a bond, if necessary, to guarantee that such person(s) will not become a public charge during his or her stay in the United States, or to guarantee that the above named person(s) will maintain his or her nonimmigrant status, if admitted temporarily, and will depart prior to the expiration of his or her authorized stay in the United States.
- 6. I understand that:
 - a. Form I-134 is an "undertaking" under section 213 of the Immigration and Nationality Act, and I may be sued if the person(s) named in **item 3** becomes a public charge after admission to the United States;
 - b. Form I-134 may be made available to any Federal, State, or local agency that may receive an application from the person(s) named in **item 3** for Food Stamps, Supplemental Security Income, or Temporary Assistance to Needy Families; and
 - c. If the person(s) named in **item 3** does apply for Food Stamps, Supplemental Security Income, or Temporary Assistance for Needy Families, my own income and assets may be considered in deciding the person's application. How long my income and assets may be attributed to the person(s) named in **item 3** is determined under the statutes and rules governing each specific program.

7. I am employed as or engaged in the business of _____ with _____
 (Type of Business) (Name of Concern)

at _____ (Street Number and Name) _____ (City) _____ (State) _____ (Zip Code)

I derive an annual income of: *(If self-employed, I have attached a copy of my last income tax return or report of commercial rating concern which I certify to be true and correct to the best of my knowledge and belief. See instructions for nature of evidence of net worth to be submitted.)* \$ _____

I have on deposit in savings banks in the United States: \$ _____

I have other personal property, the reasonable value of which is: \$ _____

I have stocks and bonds with the following market value, as indicated on the attached list, which I certify to be true and correct to the best of my knowledge and belief: \$ _____

I have life insurance in the sum of: \$ _____

With a cash surrender value of: \$ _____

I own real estate valued at: \$ _____

With mortgage(s) or other encumbrance(s) thereon amounting to: \$ _____

Which is located at: _____ (Street Number and Name) _____ (City) _____ (State) _____ (Zip Code)

8. The following persons are dependent upon me for support: *(Check the box in the appropriate column to indicate whether the person named is wholly or partially dependent upon you for support.)*

| Name of Person | Wholly Dependent | Partially Dependent | Age | Relationship to Me |
|----------------|--------------------------|--------------------------|-------|--------------------|
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |

9. I have previously submitted affidavit(s) of support for the following person(s). If none, state "None".

| Name of Person | Date submitted |
|----------------|----------------|
| _____ | _____ |
| _____ | _____ |

10. I have submitted a visa petition(s) to U.S. Citizenship and Immigration Services on behalf of the following person(s). If none, state "None".

| Name of Person | Relationship | Date submitted |
|----------------|--------------|----------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

11. I intend do not intend to make specific contributions to the support of the person(s) named in item 3.
(If you check "intend," indicate the exact nature and duration of the contributions. For example, if you intend to furnish room and board, state for how long and, if money, state the amount in U.S. dollars and whether it is to be given in a lump sum, weekly or monthly, and for how long.)

Oath or Affirmation of Sponsor

I acknowledge that I have read "Sponsor and Alien Liability" on Page 2 of the instructions for this form, and am aware of my responsibilities as a sponsor under the Social Security Act, as amended, and the Food Stamp Act, as amended.

I certify under penalty of perjury under United States law that I know the contents of this affidavit signed by me and that the statements are true and correct.

Signature of Sponsor  _____ Date _____

Certificate of Compliance

Health/Accident Insurance Requirements

Non-Immigrant Students on (F/M) visa

Non-immigrant (F/M) students shall not be permitted to register or be permitted to continue enrollment at Pasco-Hernando State College without demonstrating that they have adequate medical insurance coverage for illness and injuries in the United States.

Insurance proceeds may not be restricted to a specific institution, clinic, health care entity or locale, and the provider must have a claims office in the United States.

All non-immigrant (F/M) students enrolled at Pasco-Hernando State College must comply with this regulation. Please read carefully and complete the following.

I HAVE READ THE COLLEGE'S REGULATION ABOVE, WHICH REQUIRES THAT I HOLD MEDICAL AND ACCIDENT INSURANCE IN ORDER TO BE ENROLLED FULL-TIME AT PASCO-HERNANDO STATE COLLEGE. IN ORDER TO COMPLY WITH THIS REGULATION I HAVE PURCHASED THE FOLLOWING INSURANCE POLICY:

NAME OF INSURANCE COMPANY: _____

POLICY NUMBER: _____

I HEREBY CERTIFY THAT I HAVE READ AND UNDERSTAND THE ABOVE MENTIONED COLLEGE REGULATION, AND THAT I AM NOW IN COMPLIANCE WITH THAT REGULATION, AND THAT I WILL CONTINUE TO DO SO AS LONG AS I AM A STUDENT OF PASCO-HERNANDO STATE COLLEGE. I FURTHER CERTIFY THAT THE INFORMATION GIVEN ABOVE IS COMPLETE AND ACCURATE, AND I UNDERSTAND THAT MAKING FALSE OR FRAUDULENT STATEMENTS IN THIS CERTIFICATION OF COMPLIANCE MAY RESULT IN CANCELLATION OF REGISTRATION.

NAME (type or print): _____

PHSC STUDENT ID NUMBER: _____

SIGNATURE: _____

DATE: _____

Compliance with this college regulation is required after the I-20AB has been issued to the student prior to registering for the semester that the student plans to attend. Non-compliance will prevent any future class registration until the compliance form is submitted and approved.

Certificate of compliance (2/28/14) revised

PASCO - HERNANDO STATE COLLEGE

F1- TRANSFER ELIGIBILITY (VISA CLEARANCE) FORM

TO THE STUDENT: Please complete the student section of this form and request the International Student Advisor at the school you are currently attending to complete the rest of the form. **YOU WILL NOT BE ISSUED AN I-20 WITHOUT THIS FORM IN YOUR FILE.**

Name of Applicant: _____
(Last) (First) (Middle)

Present Address: _____

_____ Date of Birth _____ Country of Citizenship

I am applying for Fall (August) ____ Spring (January) ____ Summer (May/June) ____

I authorize my International Student Advisor to provide the information below as part of my application for admission to Pasco-Hernando State College.

Signature: _____ Date: _____

TO BE COMPLETED BY THE DESIGNATED SCHOOL OFFICIAL:

1. What immigration status does this student have? () F-1 () Other: _____
If F-1, what is the immigration admission number? _____
2. The student has a SEVIS I-20 ____ Yes ____ No SEVIS ID # _____
SEVIS release date: _____
3. Dates of attendance at your institution: from: _____ to _____
4. To the best of your knowledge, is the student currently in legal F-1 status? ____ Yes ____ No
If no, explain: _____
5. To the best of your knowledge, is the student eligible to process a transfer notification?
If no, explain: _____
6. Has this student requested any of the following employment authorizations: *Curricular, Optional Practical Training, or Economic Necessity?* ____ Yes ____ No
If yes, type of employment: _____
Date of employment: _____

(If necessary, use the back of the form to explain any answers)

Signature of School Official & Seal: _____

Name: _____ Phone: _____

Title: _____ Date: _____

Name and Address of Institution: _____