

## Shoreline Community College J-1 Exchange Visitor & J-2 Dependent International Student Application

international@shoreline.edu

**Shoreline Community College** 

**International Admissions** 

**International Education** 

**HOW TO SUBMIT** 

Email:

Mail:

## **MINIMUM REQUIREMENTS**

- Completion of the equivalent of U.S. 9th grade
- Must be at least 16 years of age at program start date

## **TUITION RATE**

 Non-Resident/Non-U.S. Citizen https://tinyurl.com/yb9g3m5y

https://tinyurl.com/yb9g3m5y	16101 Greenwood Ave. N				
TO APPLY, PLEASE SUBMIT	Shoreline, WA 98133 USA				
•	Fax: 206-546-7854				
(Application will not be reviewed until ALL required documents are submitted)	In person: International Education, Room 9302				
☐ Completed application form	Application Fee Payment Information				
☐ \$50 application fee (non-refundable)  A copy of: ☐ DS-2019	Application fee is required to process your application online payment  Please use our secure online form: www.tinyurl.com/y7opzyxk (We cannot accept credit/debit card by phone or email.)  Enclosed: personal check bank draft money order				
<ul><li>☐ J visa stamp page</li><li>☐ Passport photo page</li></ul>					
<ul> <li>☐ Most recent I-94 arrival record</li> <li>☐ Academic records (If you plan to study a degree/certificate program)</li> </ul>					
☐ English assessment score (recommended)	We accept faxed and scanned documents. However, we reserve the right to request original document if needed. All documents submitted for admission become the property of Shoreline Community College and will not be returned.				
1. Student Information					
I want to start in the quarter below:	Spring Summer				
YEAR YEAR	YEAR YEAR				
Last name First name	Middle Name				
te of birth (mm/dd/yy) Country of citizenship Country of birth					
Gender Male Female Marital S	tatus Married Single				
2. Current U.S. Address					
Street	City State Zip code				
Phone	Email				
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3. What do yo	u plan to study at S	noreline?			
English Langu	uage Training (ESL / EAP)				
University Tr	ansfer/Associate Degree*	Major			
Professional,	/Technical Degree Program*	Major 			
Professional	/Technical Certificate Prograr	Major n <b>*</b>			
Other (e.g. N	on-degree)	Major			
Please see http://www	w shoreline edu/programs/d	Major	s asny for programs of stud		
Please see <a href="http://www.shoreline.edu/programs/degrees-certificates.aspx">http://www.shoreline.edu/programs/degrees-certificates.aspx</a> for programs of study.  *Required to complete Academic History and submission of academic transcripts.					
4. How long do	o you plan to study	at Shoreline	<u>.</u> ?		
1 quarter/3 mon	_	_	1 Academic year/9 months	2 or more years	
5. Academic H	istory* (complete if yo	ou plan to stud	y a degree/certificate	program)	
			, , ,	Graduated?	
Name of last school you atter	nded City	Country	From (mm/yy) To ( <b>Date attended</b>	mm/yy)	
If you have taken an English Assessment Test in the last two years, please see if you qualify for an exemption. If you do, please email a copy of your score report to international@shoreline.edu. For more information: <a href="www.tinyurl.com/scc-escore">www.tinyurl.com/scc-escore</a> .					
6. J Status Stu	dy Agreement			_	
I understand that I am required to maintain J status while attending Shoreline Community College. I also verify to the best of my knowledge that all of the statements on this application form are true.					
Student's name					
(please print)	Last name	First r	name	Date of birth (mm/dd/yy)	
Student's signature		Date (mm/dd/yy)			
Students under the age of 18 must also have parent/guardian's signature					
Parent/Guardian's name					
(please print)	Last name		First name		
Phone		Email			
Parent/Guardian's sig	gnature		Date (mm/dd/y	y)	