

MILWAUKEE AREA TECHNICAL COLLEGE

International Admissions

700 W. State St. S101
Milwaukee, WI 53233
huertak@matc.edu
414-297-6430

F-1 International Student Application

Applicant Name: _____ Date: _____

Deadlines:

- July 1st for fall semester start
- November 1st for spring semester start

Application checklist:

Students from countries other than the United States who wish to study in the United States on an F-1 student visa must complete this application. Please submit this form with the following information:

Items required for admission:

- International Student Application for Admission
- Nonrefundable application fee of \$30.00
- Proof of high school/secondary school completion
 - Document must indicate a graduation or completion date.
 - For coursework completed outside the United States, official transcripts must be submitted to an educational credential agency for an official evaluation of earned foreign credentials.

ECE (Educational Credentials Evaluators) P.O. Box 514070 Milwaukee, WI 53203 Phone: 414-289-3400 Fax: 414-289-3411 www.ece.org	WES (World Education Services) Bowling Green Station P.O. Box 5087 New York, NY 10274 Phone: 212-966-6311 Fax: 212-739-6100 www.wes.org	Joseph Silny & Associates, Inc. 7101 SW 102 Ave. Miami, FL 33173 Phone: 305-273-1616 Fax: 305-273-1338 www.jsilny.com info@silny.com	Foreign Credits Inc. (Evaluation and Translation) 29 E. Madison St., Suite 1005 Chicago, IL 60602 Phone: 224-521-0170 Fax: 224-420-9497 support@foreigncredits.com www.foreigncredits.com
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- Proof of English language proficiency (TOEFL, IELTS)
 - Minimum TOEFL (www.ets.org/toefl) score required: 68 IBT, 520 PBT 190 CBT
 - Minimum IELTS (www.ielts.org) score required: 5.5 overall band
 - **Students from the following areas are exempt from this requirement:** Antigua and Barbuda, Australia, The Bahamas, Barbados, Belize, Canada, Dominica, Grenada, Guyana, Ireland, Jamaica, New Zealand, St. Kitts and Nevis, St. Lucia, St. Vincent and the Grenadines, Trinidad and Tobago, and United Kingdom.
- Evidence of Financial Support
 - Supporting documentation required
- Optional \$100 fee for Fedex delivery of I-20. Otherwise it will be mailed for free via USPS.

Items collected after admission:

- Students must provide proof of comprehensive health/accident insurance
- Copy of Passport and Visa
- Copy of I-94

Applicant Information

Full name (as it appears on passport): _____
First/Given Middle Last/Family/Surname

Gender: ___ Male ___ Female Marital status: ___ Single ___ Married

Social security number (if available): _____ Date of birth (mm/dd/yyyy): _____

Country of birth: _____ Country of citizenship: _____

Permanent Address (home country)

Street: _____

City: _____ State/Province: _____

Postal code: _____ County: _____

Phone (include country code): _____ Email: _____

Local Address (USA)

Street: _____

City: _____ State/Province: _____

Postal code: _____ Country: _____

Phone: _____ Email: _____

Emergency Contact

Name: _____ Relationship: _____

Phone (include country code): _____ Email: _____

Address: _____

Dependents

List any dependents (spouse and/or minor children) who will accompany you on an F-2 (F-1 dependent) visa:

Name	Date of birth (dd/mm/yyyy)	Country of birth	Country of citizenship	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Prior Education

How many years have you attended school? _____

Please indicate the highest level of education you completed:

- Elementary High School/Secondary Technical/Community College
 Undergraduate/Bachelors Graduate/Masters/PhD Other _____

In your country would you be qualified to attend college? Yes No

How many years do you wish to study in the United States? _____

Previously Attended Schools

High School/Secondary School: _____

City: _____ State/Province: _____

Date attended: _____ Date graduated: _____

Technical/Community College: _____

City: _____ State/Province: _____

Date attended: _____ Date graduated: _____

Undergraduate Study: _____

City: _____ State/Province: _____

Date attended: _____ Date graduated: _____

Graduate Study: _____

City: _____ State/Province: _____

Date attended: _____ Date graduated: _____

International Information

Do you have a current U.S. nonimmigrant visa?

Yes No

If yes, type of visa and expiration date (mm/dd/yyyy):

Is English your native language?

Yes No

If not, what is your native language:

Which English language proficiency exam have you taken or plan to take?

TOEFL IELTS Score: _____ Test date: _____ Waived: _____

- I will apply for F-1 international student visa outside of the United States
- I will transfer F-1 visa from another U.S. school (please fill out F-1 International Student Transfer Request form)
- I will apply for a change of visa status from _____ visa to F-1 through USCIS while in the United States

MATC Program Information

International students on an F-1 visa are only permitted in two year, associate degree programs (not technical diploma programs or certificates). Additionally, waiting listed programs and those requiring a petition process are not available for F-1 visa holders.

Have you attended this college before?

Yes No

If yes, please list the last semester and year attended:

Program choice: _____

Semester you wish to begin:

Fall Spring Year: _____

Do you plan to continue your education at a four-year college or university?

Yes No

If admitted to MATC, I agree to abide by school regulations and the U.S. immigration laws that apply to me. I certify that all information provided is factual and that financial support is expected to be available for the duration of my program. I understand that false statements and providing incorrect information may result in the cancellation of my admission and/or termination of my student visa status.

Print name: _____

Sign name: _____ Date: _____

Recognition of Financial Support

In order to issue the I-20 to an international student applicant, Milwaukee Area Technical College (MATC) must ensure there are adequate financial resources available to support the student's educational and living expenses for the duration of his/her program. The amounts listed below illustrate the cost of attending MATC for one academic year at 12 credits per semester (Fall and Spring semesters). Applicants and/or sponsors must be able to provide financial documentation equal to or exceeding the amount listed below at the time of application and must agree to continue funding the student until program completion. If a financial sponsor decides to withdraw funding for the student, MATC must be notified immediately. Financial proof for room and board must be included in the documentation and cannot be omitted regardless of the housing situation.

All supporting documentation must be written or translated into English and all financial amounts must be shown in U.S. Dollars.

Estimated Expenses for the Academic Year

Tuition and fees	\$ 5,500
Living Expenses	\$ 10,000
Books and Supplies	\$ 2,000
Health Costs	\$ 1,000
Total Estimated Expenses	\$ 18,500

Cost may vary depending on the situation. Add \$8,000 for spouse and \$4,000 per child dependent.

Funding Sources

Funds from sponsor \$ _____

Name: _____ Relationship: _____

Student personal funds \$ _____

Government/agency/employer Funds \$ _____

TOTAL FUNDS \$ _____

Total funds must be equal or greater than the total estimated expenses listed above.

Recognition of Financial Support

I, undersigned, agree to sponsor _____ who is my _____.
Student's legal name Relationship

I hereby guarantee to maintain support for this student's educational cost and living expenses while enrolled at Milwaukee Area Technical College. I agree to provide the amount of \$ _____ in U.S. Dollars per year to support the student stated above until his/her program completion. I have provided a current account statement from my bank attesting my ability to support this student. I also agree, as part of my sponsorship, to accept the responsibilities below.

- Inform MATC in writing of any changes to address or contact information or if I choose to terminate sponsorship.
- Continue funding the student for the duration of his/her program.
- Help the student make living arrangements.

Name: _____

Address: _____

Phone: _____ Email: _____

Required Supporting Documentation

Original letter from the bank that indicates when the account was opened and the current balance. Amount shown should equal or exceed the amount required to cover the student's educational expenses for the first year. Please note: this has to be an original document from the bank, written in English, and amounts shown should be in U.S. Dollars. Printouts from online banking, copies of documents or recent statements are not an acceptable form of documentation. The funds must be in an account such as a savings or checking account where funds can be accessed without restriction (proof of funding from retirement accounts, certificates of deposit or similar accounts will not be accepted).

Certification and Signature

I certify that all statements on this form are true and accurate, and that the stated funds are available for all educational and living expenses during the period specified. If I terminate sponsorship, I will notify MATC in writing.

Sponsor signature: _____ Date: _____

1. Legal name: Last _____ First _____ Middle _____
2. Former last name(s) (if applicable) _____
3. Current mailing address _____
4. City _____ State _____ Zip Code _____
5. Permanent address (if different) _____
6. City _____ State _____ Zip Code _____
() ()
7. Primary phone number _____ Secondary phone number Home Cell Work
8. E-mail address _____
9. Social Security Number _____

10. Date of Birth (MM/DD/YY) _____
11. Gender: Male Female
12. Are you a U.S. Veteran? Yes No
13. Are you a U.S. Citizen? Yes No **If yes, skip to #14**
13a. Are you in the U.S. on a Visa? Yes No
13b. Do you have a U.S. permanent resident card? Yes No
If you are not a U.S. Citizen or permanent resident, provide:
Visa Type _____ Visa No. _____
14. I am a legal resident of (circle one) **City/Village/Township**
14a. _____
City/Village/Township _____ County _____ State _____
15. Name of high school district in which you now reside _____

The following questions are confidential. Your responses will help the technical college evaluate recruitment and retention practices and will not affect admission to the college.

16. Select highest degree earned by either parent: High school diploma Associate degree Bachelor's degree Master's or beyond
17. The following questions relate to racial and ethnic identity. Please respond to both questions.
17a. Are you Hispanic or Latino (a person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race)?
 Yes No
17b. Select any other group or groups that apply to you.
 American Indian or Alaska Native. A person whose ancestors include native peoples of North and South America (including Central America), and who maintains a tribal affiliation or community attachment.
 Asian. A person whose ancestors include native peoples of the Far East, Southeast Asia or the Indian subcontinent (including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam).
 Black or African American. A person whose ancestors include any of the black racial groups of Africa.
 Native Hawaiian or other Pacific Islander. A person whose ancestors include the native peoples of Hawaii, Guam, Samoa or other Pacific Islands.
 White. A person whose ancestors include native peoples of Europe, the Middle East or North Africa.

18. I wish to attend _____ Technical College at _____ Campus
19. Have you attended this college before? Yes No If yes, last year and semester attended _____
20. Semester you wish to begin: Fall Spring Summer (if applicable) Year _____
21. Program/major choice _____ Program number (if known) _____
22. Name of last high school attended _____ City _____ State _____
Are you a high school graduate? Yes No If yes, please enter your graduation date (month/year) _____
23. If you did not complete high school and receive a diploma, have you completed either the GED® Tests Yes No or HSED? Yes No
If yes, date completed (MM/YY) _____ Test center _____
24. Circle or identify highest grade completed: 8 9 10 11 12 13 14 15 16 17 (Other) _____
25. Select highest credential received:
 Some college (postsecondary credit) Associate degree
 Short-term diploma Associate degree plus additional credential
 1-year diploma Baccalaureate
 2-year diploma More than baccalaureate
26. List previous colleges and universities attended (official transcript will be required for credit transfer)
College/University Name _____ City _____ State/Province _____ Date attended _____ Date graduated _____

27. I certify that the information on this application is true and complete to the best of my knowledge
Date _____ Signature _____