

International Student Application for Admission

Personal Data

Name _____
Last First Middle

Mailing Address _____
Street Address

City Country/Territory/State Country Postal Code or Country Code

Residential Address, if different from above _____
Street Address

City Country/Territory/State Country Postal Code or Country Code

Telephone number _____ **Fax number** _____
Country Code-City Code-Number Country Code-City Code-Number

Email Address _____

Country of Citizenship _____

Date of Birth ____/____/____ **City & Country of Birth** _____
Month Day Year

Occupation in Home Country _____

Native Language _____ **Marital Status:** ___ Married ___ Single

If you are already in the United States, please answer the following questions and submit copy of visa/I-94 and I-20:

What is your present immigration status: _____ Your admission or I-94 number _____

When does your present immigration status expire (month/day/year) _____

How long have you lived in Minnesota (year/months) _____

If you have an F-1 visa, list the date you entered the U.S. _____

Name of the institution that issued your most recent I-20 _____

Admissions Data

Name of Minnesota West campus to which you are applying

Program major, or curriculum you plan to follow: e.g., English, electrical engineering, auto mechanics, nursing. Write "undecided" if you are, but indicate any alternatives you are considering. (Check college policies for admission requirements to specific programs of study.)

1: _____ 2: _____ 3 _____

What is your current educational intent at Minnesota West?

Earn associate (two-year) degree Earn associate (two-year) degree and transfer
 Earn occupational certificate/diploma Complete courses and transfer without a degree

What term do you intend to begin taking courses? (check only one and indicate the year)

Fall _____ Spring _____ Summer _____

Do you plan to attend: Full time (12 or more credits) Part time (fewer than 12 credits)

Have you attended Minnesota West before? No Yes, last date attended _____

Are you currently attending another college/university? Yes No

Name and address of college/university attending _____

Activities/Interest (optional) Please list:

Minnesota West Community and Technical College
1450 Collegeway
Worthington, MN 56187

Educational Data

Official records/transcripts for each institution attended must be sent directly to Minnesota West.

Do you have a High school diploma? Yes No High School graduation date: _____

Are you currently in high school? Yes No

High School Attended _____
City Country/State Postal Code

List any post-secondary institutions attended.

College/University/Institution City/State/Country Dates of Attendance Degrees Earned

College/University/Institution City/State/Country Dates of Attendance Degrees Earned

College/University/Institution City/State/Country Dates of Attendance Degrees Earned

Emergency Contact (who the college should contact in case of emergency)

Contact in home country

Name: Last First Middle

Complete address in correct mail form Telephone number

Contact in the United States

Name: Last First Middle

Complete address in correct mail form Telephone number

Request for Confidential Information

Providing the following information is voluntary. This information will assist Minnesota West in evaluating student recruitment and retention policies; it will not be used for admission.

Gender: Male ____ Female ____

Race and Ethnic Background (select any that apply)

____ **Hispanic or Latino** – A person of Cuban, Mexican, Chicano, Puerto Rican, South or Central American, or other Spanish culture, regardless of race

____ **American Indian or Alaska Native** - A person having origins in any of the original peoples of the North, Central, or South America and who maintains tribal affiliation or community attachment

____ **Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent

____ **Black – or African** – A person having origins in any of the black racial groups of Africa

____ **Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or Pacific Islands

____ **White** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa

What is the highest level of education for your parent(s)/guardian(s):

Check only one box for each parent/guardian.

Parent/guardian #1

____ No high school diploma ____ High school diploma ____ Some college ____ Two year college degree/diploma
____ Bachelor's Degree or higher ____ Not sure/don't know

Parent/guardian #2

____ No high school diploma ____ High school diploma ____ Some college ____ Two year college degree/diploma
____ Bachelor's Degree or higher ____ Not sure/don't know

Signature (required by all applicants)

I certify that the information I have provided on this application and in all other admission materials is complete, accurate, and true to the best of my knowledge. I understand that it is my responsibility to request official transcripts or records from each academic institution I have attended. I understand that misrepresentation of application information is sufficient grounds for canceling my admission or registration. **Applicant must sign and date application.**

Applicant's Signature

Date