



INTEGRATED LEARNING CENTER

1560 Broadway, Suite 514 • New York, NY 10036

Phone: 212-221-1302 • Fax: 212-221-3945

www.ilc-ny.com • e-mail: ISD@ilc-ny.com

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INTERNATIONAL STUDENT PROGRAM ADMISSION APPLICATION

1. Name _____
Family/ Last Name (as it appears on your passport) First Name Middle Name

2. Date of Birth _____ Country of Birth _____
Month / Day / Year

3. Country of Citizenship _____ Primary Language _____

4. Gender: Male Female

5. Home Address (outside U.S.) _____
Street City

_____ *State/Province/Prefecture Zip code Country*

Telephone: _____ Fax: _____ E-mail _____
Country/City Code/Number Country/City Code/Number

6. U.S. Address _____
Street City

_____ *State/Province/Prefecture Zip code Country*

Telephone: _____ Fax: _____ E-mail _____
Country/City Code/Number Country/City Code/Number

7. Mailing Address _____
Street City

_____ *State/Province/Prefecture Zip code Country*

8. How did you find information about Integrated Learning Center (please check):

On a website From an agent At my school From a friend

Other (specify) _____

9. Please tell us about your level of English:

a) Beginner Pre-Intermediate Intermediate Advanced

b) How many years have you studied English? _____



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INTENDED STUDY COURSES

(Please check which course you are interested in attending and for how long)

Study period: Starting date: ____/____/____ Please note that classes start every Monday.

COURSE	How many weeks?
GENERAL ENGLISH	
BUSINESS ENGLISH	
TOEFL	
TOEIC	

IMMIGRATION INFORMATION

Are you a permanent resident of the USA? YES NO If NO, please check what immigration documentation you will need:

<input type="checkbox"/> I will need a Form I-20 to apply for a non-immigrant F-1 student visa. <ul style="list-style-type: none"> Please submit a copy of your passport with your application. 	<input type="checkbox"/> I will require a Form I-20 for dependents (children or spouse) traveling with me. <ul style="list-style-type: none"> Provide copies of your dependent's passport(s). 	<input type="checkbox"/> I am transferring from another school within the USA. <ul style="list-style-type: none"> Provide a copy of your passport, visa, I-94 and current I-20; Transfer Certification Form (contact our ISD office to obtain this form)
<input type="checkbox"/> I will need a Form I-20 to apply for a change of status to non-immigrant F-1 student visa. <ul style="list-style-type: none"> Provide a copy of your passport, visa, and I-94; Complete the I-539 Form. 	<input type="checkbox"/> I will need a Form I-20 for reinstatement. <ul style="list-style-type: none"> Please visit our ISD office. 	

ACCOMODATION

Do you need our help in arranging your accommodation? YES NO (If YES, there will be \$100 charge)

Do you need our help in arranging airport pick-up? YES NO (If YES, there will be \$100 charge)



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LIVING EXPENSES

No. of Weeks	(Approximate) Living Expenses
2 weeks	\$610
3 weeks	\$915
12 weeks	\$3,800
24 weeks	\$7,400
36 weeks	\$11,110
48 weeks	\$14,700

How do you want us to send you the I-20 Form? *Please check below.*

By regular mail

By Express Mail *(Please include an additional \$50. and send it along with your registration fee)*

By DHL *(Please include an additional \$75. and send it along with your registration fee)*



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FINANCIAL SUPPORT INFORMATION:

Source of Support	<input type="checkbox"/> Personal Funds	<input type="checkbox"/> Guarantor Funds (Parent, Relative or Sponsor)
Required Financial Support Documents	a) Certified bank statement showing amount of funds available.	a) Certified bank statement showing amount of funds available, and b) the statement of financial responsibility (below), signed by your guarantor or sponsor.

I, _____ residing at _____
(Print sponsor's name)

promise to provide financial support in the amount of \$ _____ U.S dollars for

(Name of the sponsored student or "my own")

By signing my name here, I certify that the financial information submitted with this application for admission accurately shows the named student financial arrangements for studying at Integrated Learning Center. I understand that my financial commitment is for the student and/or all accompanying family members for the duration of studies indicated above. I completed this form to assure ILC that the identified student and/or family members will not become a public charge in the United States. Official documentation verifying my financial resources accompanies this form.

(Signature of Sponsor)

(Date)

Relationship to Student



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PAYMENT INFORMATION

Please send along with this application a non-refundable and non-transferable registration fee of US\$95.

Pease make a check or money order payable to Integrated Learning Center.

For credit card payments visit our website and click on payments.

(If we do not receive the registration fee, we cannot process your Application).

All TUITION payments may be sent by a check drawn on a US bank or money order, made payable to Integrated Learning Center. If you choose to pay with credit card via Internet, please go to our website and click on payments.

I, _____, certify that the information provided in this Application is accurate and complete,
(Print your name)

and to the best of my knowledge. I understand that if I fail to comply with policies of ILC that my enrollment is subject to termination and forfeiture of tuition and fees. Additionally, I understand that I am personally responsible for compliance with all INS regulations applicable to me, as listed on the Form I-20 "Certificate of Eligibility" that was issued to me. I understand that the registration fee of US\$95, mailing fee and bank wiring fees are not refundable. I also understand that my full tuition is refundable only if I return the original Certificate of Eligibility (Form I-20) to ILC along with a signed form requesting a refund due to my visa denial by a United States Embassy or Consulate.

APPLICANT'S SIGNATURE _____

DATE _____