



Western Kentucky University



APPLICATION CHECKLIST

STUDENT NAME: _____

Academic English & University Entrance

UNDERGRADUATE & ENGLISH _____

GRADUATE & ENGLISH _____

START DATE FOR ENGLISH _____ MAJOR AREA OF STUDY _____

This application package **must** include the following items:

1.	A completed, signed Application for Admission (2 page WKU Undergraduate application OR 2 page WKU Graduate application)
2.	US\$140 Application & courier fees payable to ESLI
3.	Official certified original school transcripts
4.	Original certified school graduation diploma
5.	Sponsor's Financial Guarantee Form (signed by sponsor)
6.	Original Bank statement of sponsor
7.	2 letters of recommendation (required for Graduate applicants)
8.	Study Plan (required)
9.	Resume (Required for all Graduate Applicants)
10.	Copy of student's Passport
11.	Residence Hall Application

ENGLISH ONLY

ESLI ONLY _____ START DATE _____ ENDING DATE _____

This application package must include the following items:

1.	A completed, signed Application for Admission (2 pages)
2.	US\$140 application & courier fees payable to ESLI
3.	Sponsor's Financial Guarantee Form (signed by sponsor)
4.	Original bank statement of sponsor
5.	Copy of student's Passport

AGENCY: _____

COUNSELOR: _____

ADDRESS: _____

CITY: _____ COUNTRY: _____

TEL: _____ FAX: _____

EMAIL: _____

Mailing Address:

ESLI

4528 Humphrey Hill Road

Sedro Woolley, Washington 98284 USA

Tel: 360-724-0547 / Fax: 360-724-0548

Email: esli@esli-intl.com

Website: www.esli-intl.com



International Undergraduate Application For Admission

Please PRINT Clearly

Enrollment Level • Beginning Freshman • Transfer • Readmission • Foreign Exchange

Name (as listed on passport) _____
Family/Last Given/First Middle/Maiden

Indicate name on transcripts, if different from name above _____

U.S. Social Security Number _____ Gender Female Male
(if applicable)

Email _____ Birth Date ____/____/____ (MM/DD/YY)

Mailing Address Permanent Address (if different from mailing)
No. & Street City State/Province Country Postal Code Telephone

Emergency Notification _____
Name Relationship Street City/State/Country/Postal Code Phone

U.S. Citizen Yes No If No, permanent resident? Yes No If Yes, Alien Registration No. _____

Country of Citizenship _____ City & Country of Birth _____

Are you Currently in the U.S. Yes No If Yes, what is your current visa status? _____
(If currently in the U.S., please send copies of your visa, I-94 card, and I-20 or DS-2019 (formerly IAP-66))

Ethnic Origin American Indian or Alaska/Native Asian/Pacific Islander Black/African American Hispanic/Latino White Other
(This information will NOT be used in making admission decisions; however, it is necessary for record keeping purposes.)

Semester of Enrollment (check one) Year _____ Fall-Aug Spring-Jan Summer-May/June/July

English as Second Language Institute Applicants: (check one) Intensive English Program Only
Intensive English Program and Degree Program

Which degree are you seeking Associate Degree Bachelor Degree Non-Degree Seeking

Code of Major _____ Name of Major _____ Concentration _____
(List your desired program of study from the list of majors included) (month/year)

Have you taken the American College Test (ACT) Yes No Took or will take ACT ____/____
Scholastic Aptitude Test (SAT) Yes No Took or will take SAT ____/____
English as Foreign Language (TOEFL) Yes No Took or will take TOEFL ____/____

High School name and location _____

High School Graduation Date ____/____ (month/year) or Passed GED on ____/____ (month/year)

Chg name/SS _____ IQ _____ PIP _____ R _____ Decision Comp Ltr MR Ltr
App # _____ ACT/SAT _____ W 407 409 411
TOEFL _____ HST/FHST _____ M R S
FINCER _____ Rank/Class _____ N _____
FEE _____ PCC ___AP___ T___E___ AG _____
I _____



PLEASE PRINT CLEARLY

FOR OFFICE USE ONLY—

Date _____ Receipt # _____ Initials _____

INTERNATIONAL GRADUATE STUDIES APPLICATION FOR ADMISSION

FORM I

Are you transferring from another US school? Yes No Visa status/type _____

Have you previously applied for admission to Western Kentucky University? Yes No If yes, when? _____

1. Full Legal Name _____
As written in passport Family/Last Given/First Middle/Maiden

2. Social Security/Identification No. _____ (If none, leave blank)

3. Address:

 No. & Street City

 State/Province Country Zip Code

4. Email _____

5. Telephone Nos. Current/Local _____ Work _____

6. Emergency Notification _____
 Name Relationship Telephone Number

 No. & Street State/Province Country Zip Code

7. Gender Female Male

8. Birthdate _____
 Month/Day/Year

9. Country of Citizenship _____

10. U.S. Citizen Yes No If no, permanent resident? Yes No Alien Registration No. _____

11. Ethnic Origin: Black/African American (2) American Indian or Alaskan Native (3) Asian/Pacific Islander (4) Hispanic/Latino (5) White (6)
 (This information will NOT be used in making admission decisions; however, it is necessary for record keeping purposes.)

12. Undergraduate Degree _____
 Institution Degree Graduation Month/Year

13. Previous Graduate Study _____
 Institution Degree/Hours Graduation Month/Year

14. Have you taken the **G.R.E. Yes No Date(MM/YY) _____ If yes, scores reported to Western? Yes No
 **GMAT Yes No Date(MM/YY) _____ If yes, scores reported to Western? Yes No
 TOEFL Yes No Date(MM/YY) _____ If yes, scores reported to Western? Yes No

15. Semester of Enrollment: (Choose only ONE) Year _____ Fall Spring

16. For which ONE of the following admission categories are you applying?
 Degree Seeking Second Master's degree Certificate Program

ESLI START DATE: _____

List below your desired program of study.

Program Code (MAE, MPH,) _____ Code of major (165, 109, 151) _____
 Concentration Code (PHED, PEXS) _____

Name of major _____
 Concentration(if applicable) _____
 (You must choose a Concentration in MPH)

<p>Master of Arts in Education (MAE)</p> <p>043 Counseling MNHC Mental Health Counseling MHMF Marriage/Family Therapy</p> <p>042 Educational and Behavioral Science Studies</p> <p>145 Student Affairs in Higher Education</p> <p>047 Adult Education</p> <hr/> <p>Master of Science (MS)</p> <p>052 Agriculture</p> <p>056 Biology</p> <p>059 Chemistry</p> <p>114 Communication Disorders Web-based CD program</p> <p>117 Computer Science</p> <p>072 Geoscience</p> <p>083 Library Media Education</p> <p>085 Mathematics</p> <p>090 Physical Education PEXS Exercise Science PPED Pedagogy - Traditional PPED - Z6 Online PE</p> <p>095 Recreation and Sports Administration</p> <p>045 Technology Management</p>	<p>149 Master of Science – Nursing (MSN) MSNA Nurse Administrator MSNE Nurse Educator MSNP Nurse Practitioner</p> <hr/> <p>Certificate Programs (CER)</p> <p>162 Community College Faculty Prep</p> <p>161 Women's Studies</p> <p>163 Leadership Studies</p> <p>165 History</p> <p>175 Organizational Communication</p> <p>203 Geographic Information Systems</p> <p>206 Complementary Health Care</p> <p>218 Addictions Counseling and Health Education</p> <p>441 Autism Spectrum Disorders</p> <p>172 Nursing Education (Post MSN)</p> <p>176 Nursing, Primary Care (Post MSN)</p> <hr/> <p>Specialist in Education Degree (EdS)</p> <p>112 Counselor Education</p> <p>147 School Psychology</p> <hr/> <p>057 Master of Business Administration (MBA)</p>	<p>Master of Arts (MA)</p> <p>410 Applied Economics</p> <p>109 Communication</p> <p>067 English</p> <p>069 Folk Studies</p> <p>049 Mathematics</p> <p>078 History</p> <p>041 Administrative Dynamics</p> <p>092 Psychology MACL Clinical MAAE Experimental MAGE General MAIN Industrial Organizational I/O</p> <p>105 Sociology</p> <hr/> <p>051 Master of Public Administration (MPA)</p> <hr/> <p>157 Master of Social Work (MSW)</p> <hr/> <p>152 Master of Public Health (MPH) PHED Public Health Education PHEH Environmental Health</p> <hr/> <p>153 Master of Health Administration (MHA)</p>
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DEADLINES: Admission files must be complete by April 1 for fall semester or September 1 for spring semester. For transfer students only deadlines are May 1 for fall semester and October 1 for spring semester. These deadlines will be enforced.

APPLICATION INSTRUCTIONS

**APPLICATION MUST BE ACCOMPANIED BY A NON-REFUNDABLE \$35 APPLICATION FEE WHICH IS SUBJECT TO CHANGE AT ANY TIME.
This excludes WKU former master's students and/or former master's applicants.**

DEGREE-SEEKING STUDENTS must have forwarded to the Graduate Studies Office one **Official** transcript from each undergraduate degree-attaining institution (unless WKU) and from any institution (except WKU) where course work has been pursued. The applicant who has not yet completed the undergraduate degree should forward one official transcript now and one after the degree is completed

**All degree-seeking students must submit appropriate standardized test scores regardless of their undergraduate grade point average. With two exceptions, all degree programs require the Graduate Record Examination (GRE) General Test. The exceptions are the Master of Business Administration, which requires the Graduate Management Admission Test (GMAT) and the Master of Arts in Administrative Dynamics, which accepts either the GRE or GMAT. Standardized test scores must be received by the Office of Graduate Studies prior to admission. The admission decision will be based upon both the transcript grade point average and the test score.

STATEMENT OF COMPLIANCE

Western Kentucky University is committed to equal opportunity in its educational programs and employment. It is an equal opportunity-affirmative action employer and does not discriminate on the basis of age, race, color, religion, sex, sexual orientation, national origin, or disability. On request, the University will provide reasonable accommodations, including auxiliary aids and services, necessary to afford an individual with a disability an equal opportunity to participate in all services, programs, activities, and employment.

The University has published policies and procedures for investigating and/or addressing discrimination or harassment in its educational programs and/or employment. If you believe you have experienced discrimination or harassment in such programs, activities, or employment, the University's policies and procedures are published in the *Hilltopics: A Handbook for University Life*; the *Western Kentucky University Personnel Policies and Procedures Manual*; and the *Catalog*. These publications, including information about University procedures, are available in the following locations:

Equal Opportunity/ADA Compliance Office
Room 445 Potter Hall
Western Kentucky University
270-745-5121

Office of Human Resources
Room 42 Wetherby Administration Bldg.
Western Kentucky University
270-745-5360

Office of the President
1906 College Heights Blvd
Western Kentucky University
270-745-4346

Inquiries about alleged discrimination may also be made to the Office for Civil Rights, The Wanamaker Bldg., Suite 515, 100 Penn Square East, Philadelphia, PA 19107, (215) 656-8541; the Kentucky Commission on Human Rights, 832 Capital Plaza, 500 Metro Street, Frankfort, KY 60601, (502) 564-5530; or the Equal Employment Opportunity Commission, 600 Martin Luther King, Jr. Place, Suite 268, Louisville, KY 40402, (502) 582-5851.

I hereby affirm that all information supplied in this application is complete and accurate. I understand that withholding or giving false information will make me ineligible for graduate admission to WKU or ineligible to continue in school if admission has been granted, in whole or in part, on the basis of such information.

Signature of applicant _____

Date (mm/dd/yyyy) _____

Mail with check or money order for \$35 to: Graduate Studies and Research, 1906 College Heights Blvd. #11010, Bowling Green, KY 42101-1010 or supply credit card information below.

Master Card Card Number _____ Expiration Date _____
Visa V-Code _____ (3 digit number on the back of the card)
Discover Card Holder Name _____
Card Holder Signature _____

Western Kentucky University

Sponsor's Financial Guarantee

Name of Student: _____
(Family Name) (Given Name)

I certify that I am financially able and willing to support the above mentioned student while he/she is pursuing a course of study at Western Kentucky University. I hereby guarantee to provide sufficient funds to pay for the tuition, fees, medical insurance, living and personal expenses of the student while studying at Western Kentucky University.

Signature of Sponsor: _____

Relationship to Student: _____

Date: _____

_____ family members will accompany student

Name	Relationship	Date of Birth	Country of Birth

An additional US\$5,000 for Spouse and US\$3,000 per child per month will be required in financial support documents.

An original bank letter or statement of account must be attached to this form providing evidence of funds available to meet the expenses of the student.



WESTERN KENTUCKY UNIVERSITY RESIDENCE HALL HOUSING AGREEMENT

PLEASE PRINT

 LAST NAME FIRST NAME (FULL LEGAL) MIDDLE NAME NAME YOU GO BY

 SOCIAL SECURITY NUMBER OR WKU ID DATE OF BIRTH HOME PHONE NUMBER E-MAIL ADDRESS

PERMANENT ADDRESS _____
 STREET CITY STATE ZIP CODE

AGREEMENT BEGINNING (check one) <input type="checkbox"/> Fall Semester Year <input type="checkbox"/> Spring Semester Year	CLASSIFICATION <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate	RESIDENT STATUS <input type="checkbox"/> New <input type="checkbox"/> Returning <input type="checkbox"/> Transfer CURRENT ASSIGNMENT Hall / Room	ACADEMIC COLLEGE OR MAJOR <input type="checkbox"/> Arts & Humanities <input type="checkbox"/> Business <input type="checkbox"/> Science & Engineering <input type="checkbox"/> Undecided <input type="checkbox"/> Education <input type="checkbox"/> Health & Human Services I prefer to go to bed: <input type="checkbox"/> Early (before 11pm) <input type="checkbox"/> Late (after 11pm)
GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female			

HOBBIES/INTERESTS (Select all that apply.)

Anime/Animation Outdoor Activities Shopping
 Bible Study Performing Arts Sports
 Computers Physical Fitness The Environment
 Cooking Reading Travel
 Cultural Exploration Role Playing Video Games
 Musical Instruments Science Fiction Volunteerism

MOST IMPORTANT PREFERENCE (Check Only One)

Single Gender
 Residence Hall _____
 Specific Room _____
 Roommate
 Private (space permitting)
 Themed Living Option _____
 Living/Learning Community _____

MUSIC PREFERENCES (Check all that apply)

Pop Rock Hard Rock
 Alternative Other:
 Rap
 Country
 Contemporary Christian

SPECIAL NEEDS

Physical
 Medical

*For special accommodations, contact Student Disability Services @ (270) 745-5004

SMOKING PREFERENCE

Are you a smoker? Yes No
 Would you object to a roommate who smokes? Yes No

Have you received a Meningitis vaccination? Yes No Do Not Know

Roommate PREFERENCE: _____
 LAST NAME FIRST MIDDLE SOCIAL SECURITY NUMBER

- This document, when submitted with appropriate signature(s) and a \$150.00 deposit, is a request to rent Western Kentucky University residence hall space.
- I have read and accept the Terms and Conditions outlined in this agreement. I understand that these preferences will be honored if possible, but cannot be guaranteed. I verify that the information is true and accurate.

Signature (Resident's) _____ Date _____ Age _____

Signature _____ Date _____
 Parent or Guardian if resident is under 18 years of age

OFFICE USE ONLY
 ASSIGNMENT: RRS RRD AD

DATE RECEIVED: _____

TIME: _____

RECEIPT NO: _____

CLERK: _____

MAIL RENEWAL

WINDOW NEW AP

HMF CREATED/UPDATED: _____

SPECIAL NOTES:

HOURS: _____ GPA: _____

RESIDENCE HALL HOUSING AGREEMENT

Terms & Conditions

I. REQUIRED HOUSING POLICY

1. Freshmen and sophomores (less than 60 hours) are required to live on campus, space permitting. Exemptions include students who are: veterans of military service (181 days or more), married, have dependent children, 21 years of age or older, members of fraternities or sororities living in chapter houses (sophomores only), or commuting from their parent's permanent address and primary residence. Requests for exemption based upon special circumstances (defined as unique and unusual) will also be considered. Students who live on campus will not be granted an exemption to commute once the contract period begins. A fee of \$1000 is assessed to students who are in non-compliance with this policy.

II. ELIGIBILITY

1. All full-time WKU, Bowling Green Community College and exempted part-time students may live on campus.
2. If a resident fails to enroll or pay fees and is therefore not an enrolled student, the resident agrees to vacate the premises within 48 hours.

III. PERIOD OF AGREEMENT

1. Upon execution of this Agreement by both parties and payment of the deposit, this contract becomes effective and constitutes a **binding Agreement for the full academic year (Fall and Spring Semesters)** or the remaining portion thereof.
2. **Any student who remains enrolled full-time, but withdraws from University Housing during the contract period without being released from the Agreement, will: forfeit the deposit, be assessed a room charge through the official date of withdrawal, and be assessed a \$750 contract termination fee.**

IV. SERVICES PERIOD

1. Provided residence hall space is available, the University agrees to furnish a space and use of public areas in the residence halls.
2. The University provides housing for the recess periods of Thanksgiving, semester break & Spring Break in Pearce Ford Tower. Residents interested in staying on campus during these periods should apply to Pearce Ford Tower. All other halls will close for these periods, but residents may leave personal belongings in their room.

V. HOUSING DEPOSIT

1. A \$150 housing deposit is required to file this Agreement, and serves as a combination room reservation, damage, cancellation and room checkout deposit.
2. This deposit may be carried over to the following academic year upon fully meeting the terms of the Agreement for the current academic year.
3. This deposit does not apply toward the semester housing fee or other University obligations unless the resident fails to meet the payment schedule and therefore accumulates a past due obligation with the University.
4. Forfeiture of all or part of this deposit may result from cancellation of this Agreement, failure to check-in by the first day of classes, failure to check out properly, or having room damages and/or missing equipment.

VI. ROOM ASSIGNMENTS

1. The University agrees to determine room assignments based upon date of receipt,

indicated preferences, and priority status. Returning Residents who renew their Agreement prior to the established deadline are given "priority status" and reassigned first. Incoming freshmen and transfer students are assigned next. Returning students who apply after the deadline are not guaranteed a hall/room assignment for the upcoming academic year.

2. Roommate assignments are based upon the dates of receipt, priority status and mutual request for one another. Residents are encouraged to submit their Agreements together.

3. The University makes all assignments without regard to race, sexual orientation, religion or national origin and rejects all requests for changes of assignments based upon these reasons.

4. The Resident agrees to observe the room change procedures established by the university and to have prior written approval before making a room change.

5. If a vacancy occurs in the assigned room, the remaining Resident agrees to: seek out another roommate; accept another roommate as assigned; move to another room if requested; or pay additional charges based upon lower occupancy of the room.

6. A resident may not sublease or rent a room assignment or permit another person to share a private room assignment.

7. The University reserves the right to modify room assignments for disciplinary reasons, catastrophe, closing of the facility or irresolvable roommate incompatibility. This Agreement may also be canceled by the University for disciplinary reasons. **Students removed from University Housing for disciplinary reasons will remain obligated to the terms of this Agreement and any applicable fees.**

8. If housing demand exceeds capacity, the University reserves the right to use temporary room assignments on campus.

9. If space is available, request for private rooms will be approved on a first-come, first-serve basis. The Resident of a private room agrees to pay the additional charges either before the semester begins or before the move is complete.

VII. HOUSING FEE PAYMENTS

1. A Resident agrees to pay the full semester housing fee by the due date.

2. The Resident agrees that any deviation from the established schedule of payment or any problem with payment, must be approved by the office of Billings & Receivables before payment is due.

3. The Resident agrees that failure to make payment as prescribed does not relieve the Resident of accumulated housing fees while in residence. The Resident understands that nonpayment will result in denial of residence hall accommodations and services, as well as University registration, until the amounts due are paid.

4. Should a requested room change to another residence hall, which has a lower semester housing fee be approved, the Resident agrees that no housing fee refund will be made.

VIII. CANCELLATION BEFORE THE BEGINNING OF THE ACADEMIC YEAR

1. A Resident who cancels this Agreement will receive a partial refund based on the following dates:

1. Cancellation received or postmarked by July 1 for an Agreement beginning Fall Semester or November 15 for Spring Semester, will receive a \$100 refund.

2. Cancellation received or postmarked between July 2 and August 1 for an Agreement beginning Fall Semester or November 16 and December 15 for Spring Semester, will receive \$50.
3. Cancellation received after August 1 for Fall or December 15 for Spring Semester received NO REFUND of deposit.
2. Written notice of cancellation must be made to the Department of Housing and Residence Life in order to receive a deposit refund.
3. A Resident who is denied admission will receive a full refund of the deposit when they cancel.
4. A Resident who does not receive a room assignment either permanent or temporary, before the beginning of the academic year, due to unavailable space, will receive a full refund of the deposit.

IX. CANCELLATION AFTER THE BEGINNING OF THE ACADEMIC YEAR

1. A Resident who does not check into the assigned room by midnight of the first day of classes will be considered a "no show", and be canceled immediately. The housing deposit will not be refunded to no-show Residents.
2. Residents must go through the official withdrawal process to cancel this Agreement. Official withdrawal procedures are outlined in the University publication *Hilltopics for Residence Hall Living*. The housing deposit will not be refunded to students who unofficially withdrawal.
3. **A Cancellation Charge of \$150, any applicable housing fees, and a \$750 contract termination fee will be assessed to a Resident who officially withdraws from the residence hall at any time during the Academic Year and subsequently continues full-time enrollment.** Exceptions to the Contract Termination Fee will be made for marriage, graduation, ineligibility to continue enrollment due to failure to meet academic requirements, or other circumstances which are determined by the University to be beyond the control of the student. Requests for Exception from the Contract Termination Fee along with appropriate documentation must be submitted to the Department of Housing and Residence Life.
4. A Resident's date of official withdrawal from the assigned residence hall room will determine the room charge and, if applicable, the amount of housing fee refund.
5. A Resident's housing fee charge will be \$150 through the first week of the semester and thereafter be determined by the following schedule: Second Week: 50% of semester fee; Third Week: 25% of semester fee. After the third week, there is no refund of the semester fee. The refund amount will be the difference between the established housing fee charge and amount paid.
6. An assigned Resident who does not go through the official withdrawal process to cancel this Agreement on or before the last day of finals week of the Fall Semester will be considered an assigned Spring Semester Resident and will be charged a Spring Housing fee accordingly.

X. POLICIES

1. The Resident agrees to become aware and observe all published policies affecting his/her status with the University. Specifically included in this Agreement by reference are the University publications *Hilltopics for Residence Hall Living* and the Student Handbook.

XI. FURNISHINGS, UTILITIES, and SANITATION

1. The University agrees to provide each resident with a bed, chest of drawers, closet space, desk, and a desk chair. An active phone jack, cable outlet, and data hookup are also provided in each room.
2. The University agrees to provide reasonable amounts of heat, water, electricity, and air-conditioning. Interruptions on a temporary basis for reasons of maintenance, repair or catastrophe will not be considered a breach of this Agreement and the University assumes no responsibility for damages such as food spoilage. If an interruption occurs, the University agrees to restore the affected service within a reasonable time.
3. The University agrees to provide trash removal from designated areas and to clean common hallways, baths, lounges, and general public areas on a regular basis.

XII. CARE OF FACILITIES

1. The Resident agrees to be directly and financially responsible for keeping the room and its furnishings clean and free from damage, and to advise the hall director of any deteriorated conditions of the room or its furnishings.
2. The Resident agrees not to modify, or allow the modification of the assigned room or other parts of the building. The Resident agrees to obtain advance written permission from the Hall Director for painting, moving of additional furniture or constructing large extraneous structures.
3. The Resident agrees to pay charges for room damages, special housekeeping or maintenance services necessary due to misuse or abuse of facilities.
4. The Resident agrees to use public areas in a way that contributes to the orderliness and cleanliness of all areas used by Resident and guest.
5. The Resident agrees to report loss of the room key and to pay the charges for key and lock replacement.
6. The Resident agrees to check the smoke detector in the room once per month.
7. The Resident agrees to dispose of room trash in the designated areas.

XII. LIABILITY

1. The University does not assume responsibility for the Resident's or other persons' loss of money or valuables, or for the loss of or damage to personal property and recommends that the Resident contact an insurance carrier concerning the availability of protection against such losses.

Transfer Form for Applicants Currently in the U.S.

ESLI at WKU's SEVIS School Code: NOL214F21308000

INSTRUCTIONS TO APPLICANTS IN THE U.S.: All students should complete section A of this form. If you are on an F-1 or J-1 visa, you should request the International Students Advisor or counselor at the school you currently attend or most recently attended to complete Section B. You will not be issued an I-20 from ESLI at WKU until this form is completed and returned with the documents requested. Once you are issued an I-20 from ESLI at WKU, you must report to the Office of International Programs within 15 days of the beginning of classes to have your transfer processed. All forms should be sent to the address indicated on the back.

SECTION A: INFORMATION FURNISHED BY THE APPLICANT

FULLNAME _____
(Family or surname) (First or given name) (Middle name)

SSN: _____ COUNTRY OF CITIZENSHIP _____

SEVIS ID NUMBER _____

SEMESTER OF INTENDED MAJOR FIELD DEGREE
ENROLLMENT AT WKU _____ OF STUDY _____ SOUGHT _____

MOST RECENT US INSTITUTION ATTENDED DATES OF ATTENDANCE
_____ from _____ to _____
(Name of Institution)

(Institution's SEVIS School Code)

Place and X next to the visa classification you now hold and attach copies of the documents requested.

- _____ F-1 Student: Attach copies of your I-94 (both sides) and **all I-20's issued to you**
- _____ F-2 Dependent: Attach copies of your I-94 (both sides) and your spouse's I-20 ID.
- _____ J-1 Student/Scholar: Attach copies of your I-94 (both sides) and all DS-2019's (IAP-66) issued to you.
- _____ J-2 Dependent: Attach copies of your I-94 (both sides) and all DS-2019's (IAP-66) issued to you.
- _____ L-2 Dependent: Attach copies of your I-94 (both sides).
- _____ H-1 Employee: Attach copies of your I-94 (both sides) and I-797 approval notice.
- _____ H-4 Dependent: Attach copies of your I-94 (both sides).
- _____ Other: Please specify and attach documentation (I-94, visa, approval notice, etc.)

I HEREBY AUTHORIZE THE INTERNATIONAL STUDENT ADVISOR AT THE U.S. INSTITUTION I HAVE MOST RE-
CENTLY ATTENDED TO REVIEW THE INFORMATION PROVIDED ABOVE AND ON THE ATTACHED PHOTOCOPIED
DOCUMENTS (S) AND TO PROVIDE THE ADDITIONAL COMMENTS REQUESTED IN SECTION B OF THIS FORM.

Signature _____

(OVER)

SECTION B: ISA REPORT

INSTRUCTIONS TO THE INTERNATIONAL STUDENT ADVISOR (ISA) AT THE INSTITUTION CURRENTLY OR MOST RECENTLY ATTENDED BY THE APPLICANT. Before filling out Section B, please review the information the applicant has provided in Section A against the records maintained in your office. Please answer the following questions and return the completed form to the address given at the bottom of this page. Thank you.

1. Is the information furnished in Section A (including photocopies of certificates of eligibility) complete and accurate according to records in your office? YES NO

(If NO, please comment) _____

2. To the best of your knowledge, is this student currently in status with the INS? YES NO

3. Has the student ever been reinstated to status? If yes, please indicate the date the reinstatement was approved: _____.

4. If the applicant is in F-1 status, please indicate from your records his/her:

First day of F-1 status _____ INS Admission Number _____
Dates attended at your institution: From _____ To _____

Practical Training authorized by your institution (Please indicate type and specific dates):

5. If the applicant is in J-1 status, please indicate from your records his/her:

First day of J-1 status _____ INS Admission Number _____

Name of Program Sponsor _____

Program Sponsor's SEVIS Program Number _____

Academic Training Authorized (Specify Dates) _____

6. SEVIS Transfer-Out Date: _____

Name and Title of ISA _____

Address _____

Telephone () _____ Telefax () _____

Signature _____

PLEASE RETURN THIS FORM AND ATTACHMENTS TO: **ESLI, WKU**
1 Big Red Way, Bowling Green, KY 42101-3576
Fax: 270-745-7065



USA



CANADA

Eastern University
 McNeese State University
 New Mexico Tech
 Texas A&M University – Corpus Christi
 University of Southern Indiana
 West Texas A&M University
 Western Kentucky University
 Bowling Green Community College at
 Western Kentucky University

4528 Humphrey Hill Road
 Sedro Woolley, WA 98284

Email: esli@esli-intl.com
 Website: www.esli-intl.com

TEL: 360-724-0547
 FAX: 360-724-0548

Trinity Western University
 Langley, British Columbia

Redeemer Pacific College
 Langley, British Columbia

ESLI

CREDIT CARD AUTHORIZATION

NAME OF STUDENT: _____

I authorize ESLI to debit on my credit card details as follow:

CREDIT CARD HOLDER: _____

() MASTERCARD () VISA () AMERICAN EXPRESS

CREDIT CARD NUMBER: _____

SECURITY CODE (3 digits): _____

EXPIRATION DATE: _____

ZIP CODE: _____

The amount of \$ _____

That refers to the payment of the enrollment fee at the ESLI Language Center.

 Credit Card Holder' s Signature

 City, and Date