Instructions for Application and Admission

Thank you for your interest in Lassen Community College. Please read all of the following information before completing your application packet. A letter of acceptance will be sent only after all of your documents are on file in our admissions office.

TIMELINES
To allow time for the exchange of correspondence, processing and evaluation of your academic records, please return your application by June 15th, for the fall (August-December) semester and October 15th, for the spring (January – May) semester.

FINANCES
International students must show that they are financially able to support themselves while in the U.S. Please complete and return the confidential Certificate of Balance statement and have it certified by your bank. You should show a minimum of the estimated cost for one full school year, as shown under “Expenses”.

ENGLISH
For those students whose primary language is not English, A TOEFL (Test of English as a Foreign Language) score of 450 (paper)/133 (computer based)/45(internet based), or equivalent, is required for admissions. Request a TOEFL score report to be sent directly to Lassen Community College at TOEFL code #4383. In American Trust Territories I-20 or TOEFL not required.

ACADEMIC PROGRAM
International students must enroll in a full-time program with 12 or more units each semester. Failure to maintain a full course of study may lead to dismissal from the College and deportation from the U.S. Students admitted with less than a 50 IBT TOEFL, or equivalent, should expect to take developmental English reading and writing course, including one or more of the following: English 106 ESL Basic Skills, 107 ESL Intermediate Skills, 102/3 Basic Writing, 101 Reading Skills development, 100 Advanced reading, 50 Introduction to Composition, 60 Technical Writing.

SCHOOL RECORDS
Have official copies of your high school or secondary school diplomas and/or certificates sent to Lassen Community College. All education records must have proper certification and be translated into English. If you have attended high school or college in the U.S., the official transcripts must be sent directly from the institutions to Lassen Community College.
HEALTH STATUS
International students must have a current health and accident insurance policy before registering for the semester. If you do not have a current policy from your home country that pays your medical bills in the U.S., you will be required to purchase a policy here. You must provide evidence that you have received all required tests and shots, including a current PPD, chest x-ray, or test for tuberculosis, verified by a physician before you will be admitted.

HOUSING
It is recommended that international students live in the Lassen Community College dormitory or other approved housing for their first year. A deposit will hold your place in the dormitory.

EXPENSES
Cost of Attendance for the 2012-2013 Academic Year:
   Enrollment Fees: $ 8,192
   Books & Supplies: $ 1,666
   Food & Housing: $ 7,064
   Transportation: $ 890
   Personal: $ 2,278

MAILING ADDRESS
Please send all documents directly to:

   Lassen Community College
   International Admissions
   P.O. Box 3000
   Susanville, CA  96130-3000

ADDITIONAL CONTACT INFORMATION
Phone: 530.251.8808
FAX: 530.251.8802
Email: sjonas@lassencollege.edu

We look forward to hearing from you, and invite you to join us at Lassen Community College where your future in higher education begins.
APPLICATION FOR INTERNATIONAL STUDENTS

Legal Name: ___________________________________________________________

LAST     FIRST    MI

Birth date: __________________________ Male: _______ Female: _______
Month/Day/Year

Mailing Address: ________________________________________________________

City: _________________________ Country: _____________________

Phone: _______________________ FAX: ______________________

Email Address: ________________________________________________

Country of Citizenship: _____________________ Country of Birth: _____________

Are you a U.S. Citizen? ____________________ California Resident? __________

Do you have a current Visa? _____________ Visa Number: _______________

Resident Visa? _____________ Student Visa? _____________

Other? _______________________ Date of Issue: ______________

Date of Expiration: ____________________________________________

Primary Language: ________________________ Other Language: _____________

When do you plan to enroll in classes at Lassen Community College?

Fall: ______  Spring: ______  Other: ______

Proposed Major: ___________________________ Minor: _______________________

Person to Contact in case of emergency:

Name: ________________________________________________________________

Address: _____________________________________________________________

Home Phone: _______________________ Work Phone: _____________________
AGREEMENT WITH LASSEN COMMUNITY COLLEGE

In order for your application to be processed, the following agreement must be signed. When you agree to the conditions listed below for your acceptance at Lassen Community College, you will be expected to follow through during your enrollment. If at any time you fail to meet one or more of these conditions, you may be subject to dismissal, and Lassen Community College would be obligated to inform the United States of Immigration and Naturalization that you are no longer enrolled. The conditions are as follows:

1. I will attend the orientation program for New Students.

2. I will take proficiency test in the English language and enroll in the English classes recommended by the college.

3. I will enroll in the courses programmed for me by the International Student Counselor.

4. I will maintain enrollment in a minimum of 12 units per semester and will remain in good academic standing.

5. I will maintain a current health insurance policy during my entire stay at Lassen Community College.

6. I will authorize the International Student Advisor to contact my instructors in order to monitor my academic progress.

7. I understand that if I violate any of the above conditions during my stay at Lassen Community College I will be subject to probation or dismissal.

Printed Name: ________________________________

__________________________________________________________________________

Signature                                          Date
CERTIFICATE OF BALANCE

An International Student must show sufficient funds to support himself/herself for a full school year while in the United States on a student visa. The cost of attendance at Lassen Community College for the 2012-2013 Academic Year is $18,780. The funds must be in the name of the student or a family member sponsoring the student.

Name of Sponsor: ______________________________________________________________

Relationship to Student: ________________________________________________________

Address: _____________________________________________________________________

______________________________________________________________________

Phone Number: __________________________

Name of Student: ______________________________________________________________

This is to certify that the above-mentioned person has the following amount of money in our bank. Foreign currency must be converted into U.S. Dollars.

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<tr>
<th>Type of Account</th>
<th>Balance</th>
<th>Remarks</th>
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The above statement is true to the best of my knowledge.

Name of Bank: ________________________________________________________________

Address of Bank: ______________________________________________________________

___________________________________________ ______________________________
Bank Officer’s Signature  Date
International Admissions

HEALTH FORM

If you are 18 years of age or older, complete and sign this form yourself. This form must be filled out and signed by a parent or guardian if you are under 18 years of age.

Name: _____________________________________ Birth date: ________________
Address: ___________________________________________________________________

____________________________________  _________________________
Signature of Student or Guardian   Date

Do you have any of the following?

Diabetes: _____YES  _____NO        Epilepsy: _____YES  _____NO
Rheumatic Fever: _____YES  _____NO        Asthma: _____YES  _____NO

Allergies to:

Food (which ones?): ________________________________________________
Drugs (which ones?): ______________________________________________
Other: ____________________________________________________________

(Health form continued on next page)
This portion must be completed by a physician or public health officer.

International Admissions

HEALTH FORM

Immunization record for: _______________________________________________________

These immunizations are mandatory!

Polio, Oral Sabin, date: ________________  Tetanus, date: ________________

Diphtheria (rubella) date: ________________  Rubella, date: ________________

Tuberculosis, PPD result MMS: ________________  Date given: ________________

Chest X-ray or PPD skin test date given: ____  Results: ________________________

Has the applicant had BCG? _________________________________

All test results must be verified by a physician or public health officer before the student will be accepted. A chest x-ray is required if PPD skin test is positive. X-rays must be taken no earlier than one year before student enters Lassen Community College.

Has the applicant had any other infectious diseases? ________________________________

____________________________________________________________________________

____________________________________________________________________________

Are there any special instructions regarding the health of this individual? ____________

____________________________________________________________________________

____________________________________________________________________________

Signature of Physician or Public Health Officer  Date

Address: _____________________________________________________________________

P.O Box or Street     City     State     ZIP     Country
International Admissions

MEDICAL INSURANCE AFFIDAVIT

I, (name) _________________________________, hereby submit the attached evidence of Health and Medical Insurance. This insurance will cover the usual and normal costs, which I might incur due to accident and/or illness while in attendance at Lassen Community College.

Name of Insurance Company: _______________________________________________

Address of Company: ______________________________________________________

Policy Number: ___________________________________________________________

Policy expiration Date: _____________________________________________________

I, (name) __________________________________ hereby agree to purchase, prior to my initial registration, a Health and Medical Insurance policy at my own cost. I will present evidence of compliance to the Admissions and Records Office before I am allowed to register for classes. Failure to do so will result in my dismissal from Lassen Community College.

Student’s Name (print): _____________________________________________________

________________________________________________________________________

Student’s Signature                                        Date
International Admissions

EDUCATIONAL BACKGROUND

List all secondary schools, colleges, universities, vocational and technical schools you have attended.

<table>
<thead>
<tr>
<th>Name of School</th>
<th>Country/State</th>
<th>Dates</th>
<th>Major/Degrees</th>
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What will be your primary goal in attending Lassen Community College? (Please check any that apply to you.)

_____ Associate of Arts or Associate of Science Degree
_____ Vocational/Technical Certificate
_____ Earn credits/units for transfer to another U.S. college/university
_____ Earn credits/units for transfer to a college/university in my home country
_____ To become more proficient in English

Other goals or objectives: ______________________________________________________
______________________________________________________________________________

Indicate TOEFL (Test as a foreign language) tests you have taken or will take:

Date: ________________________  Score: _____________________
Date: ________________________  Score: _____________________
Date: ________________________  Score: _____________________

What other languages, besides English, have you studied?

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<tr>
<th>Language</th>
<th>Years Studied</th>
<th>Level of Speaking</th>
<th>Reading</th>
<th>Writing</th>
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EDUCATIONAL BACKGROUND

Please write a short statement of your educational goals, describing how you might use your education in your future endeavors, after completion of your college courses.

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Housing preference:
First semester: On–campus dormitory: ___________ Host family home: __________
Second Semester: On-campus dormitory: ___________ Host family home: __________
                     Off-campus apartment: ___________ Other: ____________________

I certify that all the information of this application is correct, and I realize that false or incomplete information may result in dismissal. I understand the rules, regulations and policies outlined in the Lassen Community College catalog and agree to abide by them.

_________________________________________ _______________________________
Student’s Signature  Date

A&R11/01/2012