

International Student Application

PERSONAL INFORMATION

First Name	Middle Name	Last Name
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Birthdate (MM/DD/YYYY) (Applicant must be 18 years of age by program start date)	Immigration Information Country of Birth
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Country of Citizenship	Native Language
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Gender</td> <td> Male Female Other Decline to answer </td> </tr> </table>	Gender	Male Female Other Decline to answer	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">English Ability</td> <td> Fluent Average Poor </td> </tr> </table>	English Ability	Fluent Average Poor
Gender	Male Female Other Decline to answer				
English Ability	Fluent Average Poor				

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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Dependents arriving with you</td> <td> Spouse Children </td> </tr> </table>	Dependents arriving with you	Spouse Children	TOEFL Score: _____ TOEFL Test Date: _____ IELTS Score: _____ IELTS Test Date: _____
Dependents arriving with you	Spouse Children		

MEDICAL INFORMATION

Do you have any medical conditions or allergies?	Yes	No
Do you require any special physical or learning accommodations?	Yes	No

CONTACT INFORMATION

E-mail Address	Phone Number
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Street Address	City
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State/Province	Zip Code	Home Country
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If your parents have different contact information, please enter their contact information.

Street Address City

State/Province Zip Code Home Country

Phone Number Email

Emergency Contact Information

Emergency Contact Name Relationship Contact Phone

Contact Cell Phone Contact E-mail

Home Country

Is your Emergency Contact English Speaking?	Yes	No
Are you working with an Agency or Advising Center?	Yes	No
Do you have a relative in the U.S.? *	Yes	No
Where would you like your I-20 sent?	Current Address Parents Address Agency / Advising Center / Other	

FINANCIAL INFORMATION

How will you pay your tuition and living expenses?	Personal Funds Family Funds Government sponsorship from home country Company sponsorship from home country Sponsor in the U.S. (I-134 Required) Other: (list other sources of funds)
Which payment option will you use to pay for your tuition and fees?	Credit Card Wire Transfer

If you cannot use one of these payment methods, please contact us at mel.morem@riverland.edu.

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EDUCATIONAL INFORMATION

Name of high school you are attending/have attended

Are you a high school graduate?	Yes	No
When would you like to start Riverland?	Summer / June Fall / August Spring / January Indicate Year:	
What would you like to study?	Check all programs that relate to your studies at Riverland. You may check more than one box <input type="checkbox"/> University Transfer <input type="checkbox"/> Intensive English (IESL) <input type="checkbox"/> Associate Degree Other Program:	
What is your major/area of study?		
How long will you attend Riverland?	<input type="checkbox"/> One Semester <input type="checkbox"/> Two Semesters <input type="checkbox"/> Three Semesters <input type="checkbox"/> More than a year	
University Transfer Pathway A letter of admission to Minnesota State University Mankato may be requested at the same time you apply to Riverland. Please indicate below if you're requesting a letter of admission from Mankato. <input type="checkbox"/> Yes, I request a letter of admission		

STUDENT HOUSING

Housing placements are made in the order completed applications and placement fees are received. Preferences are met based on availability.	
Which payment option will you use to pay for your housing deposit?	<input type="checkbox"/> Credit Card <input type="checkbox"/> Wire Transfer
The \$300 housing placement fee is refundable upon request if student cancels application 2 weeks prior to Housing Move-in-Day or does not use the I-20 to enter the U.S.	
<input type="checkbox"/> I have or will find my own housing	

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Admission Policy

New students who use Riverland's I-20 to enter the U.S.A. must:

Report in person to Riverland's orientation session for new international students

Enroll for and attend the first semester at Riverland

Present originals of: passport, visa, I-94 and Riverland I-20**

Carry Health Insurance while enrolled at Riverland

By checking the box below I verify that, to the best of my knowledge, all of the statements on this form are true. I have read and agree to the published International Student Admission Policies.

All statements are true and I agree to the policies. *

Printed Name of Applicant: _____

Signature of Applicant: _____

Return application to:

Riverland Community College / Mel Morem

1900 8th AVE NW

Austin, MN 55912