Admissions and Records



2277 Napa-Vallejo Highway, Napa, Ca. 94558 707.256.7217

Attn: International Student Coordinator Email: Mceja@napavalley.edu

International Student Application

Please print or type: Please complete all pages of this application form and attach all required supporting documentation. Applications for enrollment in fall semesters must be received on or before May 1, for spring semesters, the deadline is the preceding October 1.

1. Name:				
Last, family or surname First or given name		ie	Middle initial	
2. International Address:	Number(s) and street name		Apartment or building numb	pers
City or town	Provinc	re C	Country	Postal Code
3. Address in the United S	Number(s) and street name		Apartment or building numb	pers
City or town	Provinc	e C	Country	Postal Code
Telephone Number:	Area Code	Number		
	of Birth (Western Calendar): _	Day	Month	Year
Place of Birth:				
5. Sex: Male 6. Family: If you come to the	ship: Female e United States to study, will any Yes No (s) and relationship(s) to you:	/ other member or mer	nbers of your family c	·
7. Education: Supply proof	of high school graduation or the	equivalent (attach to a	pplication).	
8. Have you taken the TO	EFL or IELTS? Yes i	No What were your	scores?:	
Please have official scores	sent directly to us e TOEFL or IELTS? Yes			(School code 004530
9. What is your major cou	rse of study?			
10. Are you already li	ving/residing in the Unite	ed States?	∕es □ No	
11. If you have been i	ssued an I-20 form, give	the name and loc	ation of the insti	tution which issued i
Are you in good standi	ng at this school?	Yes		
40 E T ' ' '				

12. Essay: To help us learn about you, please write, in your own words, an essay which explains why you plan to attend Napa Valley College. Include information about yourself, your present goals, and what you expect to do when you complete your college studies. (Please print or type your essay; use additional sheets and attach to this application)

International Student Application (cont.)

13. Financial Resources: Study in the United States is a long, difficult and expensive undertaking. It is very important that you know in advance the extent of your financial resources. Please respond to the questions below.

14. Indicate the amount (in USD \$ dollars) of money you expect to receive every month from your own funds or from other

\$:		
15. Name the source (s) of the above income:		
16. How long will you be guaranteed this support	?	
	supply (or be responsible for) any part of your finar ge, please give that person's name and address: _	
18. Insurance: Do you or will you have your own h	nealth and accident insurance while attending Nap	a Valley College?
Yes No If Yes, give the name a	and address of the insurance provider/company:	
, ,	, –	
19. If you do NOT have insurance, you will be required Yes No	uired to enroll in a group policy. Do you agree to th	nis?
Your Signature	Your Sponsor's Signature	Date

Return this completed form and all requested documents to:

sources while attending Napa Valley College:

Admissions and Records Office Napa Valley College 2277 Napa-Vallejo Highway Napa, CA 94558 USA

ATTN: International Student Admissions

Email: MCeja@napavalley.edu