



ADMISSION DOCUMENTS CHECKLIST

Required for ALL applicants:

- High School Transcripts**
Official transcripts from all secondary schools attended. Non-English transcripts must be translated and submitted with the original language.
- Proof of English Proficiency**
Official test results or evidence of English proficiency. For minimum score and acceptable qualifications: www.chaffey.edu/studentsupport/international-center/admissions-requirements.php
- Copy of Passport**
- Financial Statement**
Bank statement (dated within the past 6 months) verifying at least \$31,000 USD to fund tuition, fees, and living expenses for 1 year. If being sponsored by an organization, submit sponsorship letter guaranteeing funds. For a US bank statement of an individual other than a parent, an I-134 form must be submitted.
- Non-refundable \$40 USD Application/Activity Fee**
Pay the fee on line on your Student Finance page in your Self-Service portal.
- Tuberculosis (TB) Test and Health Insurance (Must be submitted before the first day of class.)**
TB test: Submit result (dated within the past 6 months) or get tested at Chaffey Student Health Services.
Health insurance: Must be purchased with Chaffey College prior to the beginning of the semester at: <https://acienroll.azurewebsites.net/isp/plans/?locationName=Chaffey%20College&locationId=1374>

Transfer applicants

(Students with valid I-20 from another US institution)

All of the above, plus:

- I-20 Transfer-In Form**
Refer to page 4 of the application

- Copy of current I-20, I-94, and visa**

Applicants under 18 years old (age 16-17) by the start of classes

All of the above, plus:

- Emergency Contact Information and Internet Usage Form**
<http://www.chaffey.edu/admissions/Emergency-Internet.pdf>

Once complete application packet is received, it will be under review and once approved, the admissions letter and I-20 form will be generated within 2 weeks and will be sent to the student via email.



Supplemental Application

5885 Haven Avenue, CCE-124-G • Rancho Cucamonga, California 91737, USA • +1 909 652 6195 • international@chaffey.edu

PRINT OR TYPE

1) This application is for Fall Spring Summer Year

2) Chaffey ID number: _____

**You will receive your 7-digit Chaffey ID number after you submit the International Application for Admission to College*

3) I am a:

New student (outside the US)

Transfer student (in the US at a college, high school, or ESL program). Current school: _____

Returning student to Chaffey College

How did you learn about Chaffey? Internet search Family/Friends Education Agency College Fair Other: _____

PERSONAL INFORMATION

4) Last/Family Name (as it appears on your passport): _____

First/Given Name (as it appears on your passport): _____

Middle Name: _____

5) Gender: Male Female

6) Email: _____

7) Date of Birth (mm/dd/yyyy): _____

Country of Citizenship: _____

8) Country of Birth: _____

City of Birth: _____

9) Primary Language: _____

10) Address Student is Currently Present in: _____

Home Country Phone #: _____

11) US Address or US Mailing Address: _____

US Phone #: _____

EDUCATION INFORMATION

12) Name of High School: _____ Country: _____

13) High school graduation date or expected date of graduation (mm/yyyy): _____

14) How do you satisfy our English proficiency requirement? _____

**English Proficiency Requirements for Admission: www.chaffey.edu/studentsupport/international-center/admissions-requirements.php*

15) Academic Program at Chaffey: _____

**For list of academic programs visit: www.chaffey.edu/acc/areas-of-study.php*

VISA AND I-20 INFORMATION

16) Current Visa Type:

No Visa (outside the US)

F-1 student. Which school issued your I-20? _____

Other Visa: _____

17) Do you have dependent spouse or children who will accompany you?

Yes

No

If yes, please list names and relationship:

Name: _____

Relationship: _____

Name: _____

Relationship: _____

DOCUMENTATION OF FINANCIAL SUPPORT

The US government requires all international students to provide proof of the ability to pay tuition and living expenses for the first academic year (\$31,000 USD). Along with this application, you must submit a financial statement such as a savings deposit, checking account, signed bank letter, or sponsorship letter, verifying the ability to pay educational expenses. If your sponsor is a US citizen or US permanent resident living in the US, please send us Form I-134: www.uscis.gov/i-134

19) Name of sponsor: _____ **Relationship to applicant:** _____

20) Address: _____

By signing this document of support, I promise to be financially responsible for tuition, fees, living expenses, and any other relevant expenses of the student.

Signature of sponsor: _____ Date (mm/dd/yyyy): _____

HEALTH REQUIREMENT

21) Tuberculosis (TB) Test: Proof of recent TB test within the past 6 months is required. Submit proof or get tested at Chaffey College Student Health Services. A minimal fee is charged and students will not be allowed to attend classes without proof of a negative TB test.

I have read and acknowledged this requirement: Yes

22) Health Insurance: All international students must purchase health insurance from Chaffey College and have valid coverage at all times. Failure to purchase health insurance will result in a block on class registration and the release of official records.

I have read and acknowledged this requirement: Yes

CERTIFICATION

I hereby certify that the information set forth in this application is true to the best of my knowledge. If accepted to Chaffey College, I hereby agree to abide by all rules and regulations set forth by the College.

Student Signature: _____

Date (mm/dd/yyyy): _____



Chaffey College

International Student Center

5885 Haven Avenue, CCE-124-G

Rancho Cucamonga, CA 91737

+1 909-652-6195

international@chaffey.edu

I-20 Transfer-In Form

THIS FORM IS ONLY FOR STUDENTS WITH A VALID I-20 FROM ANOTHER U.S. INSTITUTION

STUDENT SECTION

Last/Family Name (as it appears on your passport): _____

First/Given Name (as it appears on your passport): _____

Email: _____

Chaffey ID number: _____

Date of Birth (mm/dd/yyyy): _____

I request to have my SEVIS record transferred to Chaffey College.

Student Signature: _____

Date (mm/dd/yyyy): _____

DESIGNATED SCHOOL OFFICIAL (DSO) SECTION AT YOUR CURRENT SCHOOL

SEVIS ID: _____

The student is in good standing and has been maintaining a valid F-1 status.

The student is out of status. Reason: _____

Enrolled in:

Academic

ESL Studies

Program end date: _____

Date of last attendance at your school: _____

Transfer-out release date in SEVIS: _____

Chaffey College School Code: LOS214F00356000

DSO's name and institution: _____

DSO's phone #: _____ Email: _____

DSO Signature: _____

Date: _____