



GADSDEN STATE COMMUNITY COLLEGE

International Programs

Post Office Box 227 • Gadsden, Alabama 35902-0227 • www.gadsdenstate.edu

Dear Prospective Student,

Thank you for your inquiry. We have attached the information and forms that you will need for applying to the Alabama Language Institute and Gadsden State Community College.

The forms and more information are also on our website, and we invite you to also visit the site. Go to <http://www.gadsdenstate.edu>. At the top you will select "Future Students" and in the drop-down menu "International Students." You will find the application to download and print when you select the button "Application Form" on the International Programs home page.

We are very proud of our International Program at Gadsden State and hope that you will become part of our international family. True to the Gadsden State Community College Vision; *Empowering students to succeed in a global environment*, we have served international students for many years, and our intensive English program, Alabama Language Institute, has served students continuously since 1973.

If you have any questions or need help, please feel free to email international@gadsdenstate.edu or call 256 549-8438.

Again, thank you for your interest and we hope to see you soon.

Sincerely,

A handwritten signature in blue ink that reads "Becky Duckett".

Becky Duckett, Director
International Programs and Alabama Language Institute

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GADSDEN STATE COMMUNITY COLLEGE

P.O. Box 227, Gadsden, Alabama 35902-0227 (256) 549-8324 Fax (256) 549-8344

Homepage: www.gadsdenstate.edu

Email address: international@gadsdenstate.edu

APPLICATION PROCEDURES

To apply to Gadsden State Community College / Alabama Language Institute, complete and submit the Application Packet (Documents 1-8). For students transferring from a school in the United States, complete and submit the Application Packet (Documents 1-8) and the Transfer Clearance Form (Document 9).

- 1) _____ **Application for Admission — Complete** all blank spaces with the information requested.
- 2) _____ **Affidavit of Financial Support** — Submit evidence of sufficient funds to cover the cost of attending Gadsden State Community College. Have your financial sponsor complete and **sign** the affidavit. Signature needs to be certified or notarized. Include an original bank letter from your sponsor's financial institution, showing the balance in your sponsor's bank account in US dollars.
- 3) _____ **Medical Records** — A medical health history with proof of vaccinations.
- 4) _____ **Official high school transcript** — Send a certified original translated and evaluated copy of the student's high school transcript. (Suggested evaluators: <http://www.wes.org/> or <http://www.lisano-intl.com/>)
- 5) _____ **Official university transcript** — Submit original or recently certified copy of transcripts from universities you have attended. English translations are required of any transcripts not in English.
- 6) _____ **Test of English as a Foreign Language** — If applying for college, submit a TOEFL score of 500 (on the paper-based test), 61 (on the internet-based test), or IELTS (International English Language Testing System) test score of 5.5, indicating proficiency in the English language. An official score must be sent directly to Gadsden State from ETS or IELTS. The TOEFL institutional code for Gadsden State is 1262. TOEFL or IELTS score is not required for the Alabama Language Institute.
- 7) _____ **Small photograph of yourself.**
- 8) _____ **A photocopy of the ID page of your passport.**
- 9) _____ **Transfer Clearance Form** — completed by your International Student Advisor if you are a transfer student from an American university or college.

**Mail all documents together to: INTERNATIONAL PROGRAMS OFFICE
GADSDEN STATE COMMUNITY COLLEGE P.O. BOX 227
GADSDEN, AL 35902-0227**

Your application will be carefully evaluated and a decision made. If approved, you will receive an acceptance letter and the 1-20 form. If you wish to have your 1-20 sent by Federal Express or DHL, it is your responsibility to pay for the charges. The 1-20 form is a legal document and cannot be faxed. You will need to take the 1-20 form to the nearest U.S. Embassy or Consulate to apply for a student visa. For program information, visit Gadsden State's homepage: www.gadsdenstate.edu

PROGRAM OF STUDY

ACADEMIC DIVISION

AS ASSOCIATE IN SCIENCE College Transfer • Area of Concentration

47013 AGRIBUSINESS ED.....	AGE
47012 AGRICULTURE.....	AGR
47017 AQUATIC BIOLOGY.....	AQB
47000 BIOLOGY.....	BIO
11002 BUSINESS ADM.....	BUS
47031 CHEMISTRY.....	CHM
19001 COMPUTER SCIENCE SCIENTIFIC.....	CSS
19018 COMPUTER INFORMATION SYSTEMS.....	CIS
59011 CRIMINAL JUSTICE.....	CRJ
54019 ELEM. ED/EARLY CHILDHOOD PRE-SCH.ED.....	ECE
11025 FINANCIAL PLANNING & COUNSELING.....	CFP
26001 GENERAL STUDIES.....	GCS
55000 HEALTH, PHYSICAL ED. & RECREATION.....	PED
58009 HISTORY.....	HIS
58015 HISTORY EDUCATION.....	HYE
42001 MATHEMATICS & MATH EDUCATION.....	MTH
11005 OFFICE ADMINISTRATION.....	OAD
47071 OSTEOPATHIC MEDICAL (ATHENS ST).....	OMP
55015 PRE-ATHLETIC TRAINING.....	PAT
42012 PRE-ENGINEERING.....	EGR
47024 PRE-FORESTRY.....	FOR
47075 PRE-MEDICINE OR PREDENISTRY.....	MED
47008 PRE-PHARMACY.....	PPH
47009 PRE-VETERINARY MEDICINE.....	VET
58003 RELIGION.....	REL
47032 SCIENCE EDUCATION.....	PHS
59017 SOCIAL SCIENCE EDUCATION.....	SSE
58020 SOCIOLOGY.....	SOC

AA ASSOCIATE IN ARTS College Transfer • Area of Concentration

23000 ART.....	ART
20002 LIBERAL ARTS.....	LAR
26000 ENGLISH.....	ENG
23001 MUSIC.....	MUS
58002 PRE LAW.....	LAW
58005 PSYCHOLOGY.....	PSY
23002 SPEECH COMMUNICATION.....	SPH

AAS ASSOCIATE IN APPLIED SCIENCE

11001 ACCOUNTING TECHNOLOGY.....	ACT
54006 CHILD DEVELOPMENT.....	CHD
34003 CLINICAL LAB TECHNOLOGY.....	CLT
19027 COMPUTER NETWORKING ADM.....	NWA
11002 COMPUTER SCIENCE TECHNOLOGY.....	CST
34000 EMERGENCY MEDICAL SERVICE.....	EMP
54001 HUMAN SERVICES.....	HUS
11009 MARKETING MANAGEMENT.....	MKT
11018 OFFICE ADMINISTRATION-GENERAL.....	OAD
11006 OFFICE ADMINISTRATION-LEGAL.....	LEG
11019 OFFICE ADMINISTRATION-MEDICAL.....	MDS
11020 OFFICE ADMIN.-TRANSCRIPTION & CODING.....	HIT
11004 PARALEGAL.....	PRL
34006 RADIOLOGIC TECHNOLOGY.....	RAD
34001 REGISTERED NURSING.....	NUR

CRT CERTIFICATES

19039 COMPUTER- BUSINESS COMPUTING.....	BCT
19029 COMPUTER-WEB DEVELOPMENT.....	WDV
19049 COMPUTER-MICROCOMPUTER REPAIR.....	MRT
79011 LICENSED PRACTICAL NURSING (WAL).....	LPN
79012 LICENSED PRACTICAL NURSING (CCC).....	LPN
79013 LICENSED PRACTICAL NURSING (MCC).....	LPN

NCA COURSES ONLY

34003 PHLEBOTOMY.....	CLP
26004 ALABAMA LANGUAGE INSTITUTE.....	ALI
54008 PER ENRICH/TRANSIENT STUDENTS.....	UDA

TECHNICAL DIVISION

AAS ASSOCIATE IN APPLIED SCIENCE

99032 AIR CONDITION & REFRIGERATION.....	ACR
89040 AUTO MANUFACTURING TECHNOLOGY.....	AUT
89023 CIVIL ENGINEERING TECHNOLOGY.....	CET
89025 ELECTRICAL TECHNOLOGY.....	ELT
89026 ELECTRONIC ENGINEERING GEN.....	EET
89037 INDUSTRIAL ELECTRONICS SPECIAL.....	ILT
99029 INDUSTRIAL AUTOMATION TECH.....	INT
99030 MACHINE TOOL TECHNOLOGY.....	MTT
89024 MECHANICAL DESIGN TECHNOLOGY.....	MDT
79007 REALTIME BROADCAST CAPTIONING.....	BCC
79004 REALTIME REPORTING.....	RTR

CRT CERTIFICATES

99032 AIR CONDITION & REFRIGERATION.....	ACR
79020 AUTO COLLISION REPAIR.....	ABR
89040 AUTO MANUFACTURING TECHNOLOGY.....	AUT
79021 AUTOMOTIVE SERVICE TECHNOLOGY.....	AUM
89023 CIVIL ENGINEERING TECHNOLOGY.....	CET
79022 COSMETOLOGY TECHNOLOGY.....	COS
79030 DIESEL TECHNOLOGY.....	DEM
89025 ELECTRICAL TECHNOLOGY.....	ELT
89026 ELECTRONIC ENGINEERING TECHNOLOGY.....	EET
99029 INDUSTRIAL AUTOMATION TECH.....	INT
99034 MACHINE TOOL TECHNOLOGY.....	MTT
89024 MECHANICAL DESIGN TECHNOLOGY.....	MDT
99037 WELDING TECHNOLOGY.....	WDT



GADSDEN STATE COMMUNITY COLLEGE
INTERNATIONAL PROGRAMS
 P.O. Box 227 - Gadsden, Alabama 35902-0227 (256) 549-8324 - Fax (256)549-8344

APPLICATION FOR ADMISSION

**ATTACH
 RECENT
 PHOTO
 HERE
 (Required)**

DATE OF APPLICATION _____ / _____ / _____
MONTH DAY YEAR

NAME (in passport)

LAST NAME / FAMILY NAME	FIRST NAME	MIDDLE NAME

ADDRESS IN YOUR HOME COUNTRY

U.S. MAILING ADDRESS / CONTACT PERSON (IF ANY)

STREET _____

APARTMENT # _____

CITY / STATE / COUNTRY / POSTAL CODE _____

TELEPHONE _____

E-MAIL ADDRESS (Please print clearly) _____

NAME _____

STREET _____ APARTMENT # _____

CITY / STATE / ZIP _____

AREA CODE / TELEPHONE _____

E-MAIL ADDRESS (Please print clearly) _____ CELL PHONE _____

WHERE DO YOU WANT US TO SEND THE I-20 FORM ? HOME COUNTRY ADDRESS U.S. ADDRESS WILL PICK UP

DATE OF BIRTH: _____ / _____ / _____ GENDER: Male Female
MONTH DAY YEAR

COUNTRY OF CITIZENSHIP: _____ CITY OF BIRTH: _____ COUNTRY OF BIRTH: _____

ARE YOU CURRENTLY IN THE U.S.A? Yes No

IF YOU ARE IN THE U.S., LIST TYPE OF VISA STAMPED IN PASSPORT: _____ VISA ISSUE DATE: _____ / _____ / _____ VISA EXPIRATION DATE: _____ / _____ / _____
MONTH DAY YEAR MONTH DAY YEAR

PASSPORT NUMBER: _____

APPLYING FOR ADMISSION TO: Intensive English Program _____ College _____

SEMESTER YOU PLAN TO START: Fall _____ Aug. _____ Spring _____ Jan. _____ Summer _____ May _____

PROGRAM OF STUDY (in college): _____

IS ENGLISH YOUR FIRST LANGUAGE? Yes No (If no, list first and second languages) _____

IF ENGLISH IS NOT YOUR FIRST LANGUAGE, HAVE YOU EVER TAKEN THE TOEFL TEST? Yes No

If yes, please fill the following: TOEFL Test Date: _____ / _____ / _____ TOEFL Score: _____
MONTH DAY YEAR

Have your score sent directly from ETS to: **International Programs Office, GSCC, P.O. Box 227, Gadsden, AL 35902-0227**

GSCC INSTITUTIONAL CODE 1262

LIST HIGH SCHOOL YOU HAVE ATTENDED / GRADUATED:

Name of High School _____ Date of Graduation _____

LIST ANY COLLEGES AND/OR POST-HIGH SCHOOL INSTITUTIONS YOU HAVE ATTENDED:

Name of College _____ State _____ Country _____

Name of College _____ State _____ Country _____

HIGHEST DEGREE EARNED: High School or Equivalent Associate Degree Bachelor's Degree Master's Degree Doctorate Degree

ARE YOU TRANSFERRING FROM A UNIVERSITY IN THE UNITED STATES? Yes No

HAVE YOU PREVIOUSLY APPLIED TO GADSDEN STATE COMMUNITY COLLEGE? Yes, WHEN: _____ / _____ / _____ No
MONTH DAY YEAR

HOW DID YOU HEAR ABOUT GSCC / ALI? GSCC Webpage Online - other sites _____ Family / Friend Other _____

I understand that withholding information requested in this application, or giving false information may make me ineligible for admission to, or continuation in, the College. I agree to abide by the rules, policies, and regulations of the College as outlined in the Student Handbook and College Catalog. With this in mind, I certify that all above statements are correct and complete.

APPLICANT'S SIGNATURE: _____

DATE: _____ / _____ / _____
MONTH DAY YEAR

EDUCATIONAL RIGHTS AND PRIVACY ACT ("BUCKLEY AMENDMENT") NOTICE: Under the Federal Rights and Privacy Act 20 U.S.C. 12329 Gadsden State Community College may disclose certain student information as directory information. Directory information includes the names, addresses, telephone numbers, dates of birth and major fields of study of students, as well as information about students participation in officially recognized activities and sports, the weight and height of members of athletic teams, the dates of attendance of students, degrees and awards received, and the most recent previous educational agency of institution attended by a respective student. If any student has any objection to any of the aforementioned information being released about himself/herself during any given semester or academic year, the student should notify in person or in writing the Registrar Room 124 of Allen Hall during the first three weeks of the respective semester or academic year.



GADSDEN STATE COMMUNITY COLLEGE
INTERNATIONAL PROGRAMS
 P.O. Box 227 - Gadsden, Alabama 35902-0227 (256) 549-8324 - Fax (256)549-8344

AFFIDAVIT OF FINANCIAL SUPPORT

**SUBMIT COMPLETED FORM TO:
 INTERNATIONAL PROGRAMS OFFICE, GSCC
 P.O. Box 227, Gadsden, Alabama 35902-0227**

International students or their sponsors must provide evidence of sufficient funds available to support financially two semesters of study at Gadsden State Community College. This affidavit must be signed by the sponsor and stamped or sealed by a notary public, bank official or individual authorized to certify documents. An **original** letter with an official signature on **bank letterhead** must also be submitted. The letter should verify a current account balance and whether the account is in good standing. The sponsor must have a minimum income of \$25,000 (U.S. dollars) per year.

Please Print

I, _____, who resides at _____

Name of Sponsor

Sponsor Address

Sponsor Address

Sponsor E-mail Address

Sponsor Telephone Number

being duly sworn, depose and say that it is my intention to support _____

Name of Student

who resides at _____

Student Home Country Address

_____ and comes to the United States to study at Gadsden State Community College

Student Home Country E-mail Address

and reside at (U.S. address, if known) _____

Student U.S. Address

Student U.S. Phone Number

Student U.S. E-mail Address

I am aware that Gadsden State Community College does not consider students registered for classes unless the student pays **all** tuition and fees at registration.

I am willing and able to maintain and support the prospective student. This affidavit is made by me for the purpose of assuring Gadsden State Community College that the student I am sponsoring will have sufficient funds to cover tuition, fees and living expenses during his/her course of study and will not become a public charge during his/her stay in the United States of America.

Employer or source of income and net amount received per year in U.S. dollars.

 _____ \$ _____
Income per year

Relationship to student:

Mother Father Relative Friend Company Other _____

I certify that all information provided on this Affidavit of financial support is true and valid.

Signature of Sponsor

Date

Signature and statement signed and sworn before me.

AFFIX STAMP OR SEAL

Signature of Notary Public, Bank Official

Address, Location

Date

An original official bank letter verifying sponsor's financial account information must be attached. These documents will not be returned. We suggest that you request an additional copy to submit to the U.S. Embassy or Consulate with your visa application.

This portion is to be completed by a Physician.

Height _____ Weight _____ Skeletal Size: Small ___ Medium ___ Large ___ EL ___
 B/P _____ Pulse _____ Respiration _____ Temperature _____

Laboratory Findings

Hemoglobin or Hematocrit _____ WBC _____ Serology _____
 Urine: Sp.Gr _____ Alb _____ Sugar _____

Eyes		
Do you wear glasses?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Do you wear contacts?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Distant Vision	Without glasses	R20/
	With glasses	R20/
Near Vision	Without glasses	R20/
	With glasses	R20/

Ears			
Hearing normal?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	
Are drums intact?	<input type="checkbox"/> No	<input type="checkbox"/> Yes	

Head, Neck and Face	Normal ()	Abnormal ()
Nose and Sinuses	Normal ()	Abnormal ()
Mouth and Throat	Normal ()	Abnormal ()
Teeth	Normal ()	Abnormal ()
Lungs and Chest	Normal ()	Abnormal ()
Heart	Normal ()	Abnormal ()
Vascular System	Normal ()	Abnormal ()
Abdomen	Normal ()	Abnormal ()
Endocrine System	Normal ()	Abnormal ()
Female: Breast	Normal ()	Abnormal ()
Female: Pelvic	Normal ()	Abnormal ()
Male: Genital	Normal ()	Abnormal ()
Male: Hernia	Normal ()	Abnormal ()

Present Health: _____ Good _____ Fair _____ Poor

Date of exam: _____ / _____ / _____

I certify that the above information is true.

Physician's Signature _____

Student's Signature _____

TO BE COMPLETED BY COLLEGE OFFICIAL

Date Received: _____

Signature: _____



Immunization Form

To ensure the health and safety of our campus, immunizations against communicable disease is extremely important. Vaccination against Measles, Mumps, Rubella (MMR), Tetanus, and Meningococcal is required, as well as a negative Tuberculosis skin test. This is a requirement for all International Students. This form must be completed and submitted prior to admission in any ACCS institution.

Name _____
 Last First Middle SS#/ID

Address _____
 Street City State Zip

Date of Birth ____ / ____ / ____ Contact Number _____ Email _____

Section A: Required Immunizations/Tests				
			Month/Day/Year	Month/Day/Year
1. Meningitis Vaccine- within the last 5 years (Menomune, Menactra, Menveo)				
2. Measles, Mumps, Rubella (MMR)				
3. Tetanus				
4. Tuberculosis Screening				
TB Skin Test by PPD	Date Placed	Date Read	MM	Neg Pos
Chest X-Ray (if positive PPD or lab)	Date	Result	Submit copy of chest X-ray report	

Section B: Recommended Immunizations				
Please attach documentation of all childhood vaccinations (copy of Blue Card)				
	Month/Day/Year	Month/Day/Year	Month/Day/Year	Titer Date & Result
TD (Tetanus/Diphtheria)		Do not write here	Do not write here	Do not write here
AND/OR Tdap (Tetanus/Diphtheria)		Do not write here	Do not write here	Do not write here
Polio		Do not write here	Do not write here	
Hepatitis B				
Varicella (Chickenpox)			Do not write here	

I certify that the above dates and vaccinations are true.

 Signature of License Health Care Professional or Authorized Individual Date

Complete and return to: INTERNATIONAL PROGRAMS OFFICE
 GADSDEN STATE COMMUNITY COLLEGE P.O. BOX 227
 GADSDEN, AL 35902-0227



GADSDEN STATE COMMUNITY COLLEGE INTERNATIONAL PROGRAMS

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TRANSFER CLEARANCE

The Student and Exchange Visitors Information System (SEVIS) requires this office to have the following information in order to process your transfer or change of school to Gadsden State Community College. **Please complete the information in Section A and submit this form to the International Student Advisor at your present or most recent school in the United States.**

SECTION A - TO BE COMPLETED BY THE STUDENT

Family Name _____ First _____ Middle _____

Present Address _____

Institution Transferring From _____ Date of Attendance _____

I authorize my present International Student Advisor (or designated campus officer) to provide the information below

Student Signature _____ Date _____

SECTION B - TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISOR AT YOUR PRESENT OR LAST ATTENDED SCHOOL IN THE U.S.

The above named student has applied for admission to Gadsden State Community College. Your assistance is appreciated in completing this section below and returning this form with a copy of the student's current 1-20 and 1-94 to:

Gadsden State Community College
International Programs
P.O. Box 227
Gadsden, AL 35902-0227

Telephone: 256)549-8324
Fax Number: (256)549-8344
Email Address: bduckett@gadsdenstate.edu

1-94 Admission Number _____ Student Visa Type _____

1. Is this student currently IN STATUS with SEVIS? _____ If yes, please give release date _____

- Yes If no, please explain: _____
- No _____

2. Is this student currently applying for reinstatement? _____

- Yes If yes, please provide date application was filed and copies of documents. _____
- No _____

3. Is this student currently under practical training? _____

- Yes If yes, please list all periods of authorized practical training (curricular or optional) if known. _____
- No _____

4. Is he/she eligible to re-enroll at your institution? _____

- Yes If no, please explain: _____
- No _____

5. Has this student had any disciplinary/behavioral problems at your institution? _____

- Yes If yes, please explain: _____
- No _____

6. Has student encountered financial problems at your institution? _____

- Yes If yes, please explain: _____
- No _____

I certify that the preceding is to the best of my knowledge true and correct.

Signature _____ Name and Title of Official _____ Date _____

Name and Address of Institution _____ Phone Number _____