



APPLICATION FOR ENROLLMENT

Regular Post

University of California, San Diego
Extension International Student Services
9500 Gilman Drive, 0176-DD
La Jolla, CA 92093-0176, USA

Express Delivery Address

University of California, San Diego
Extension International Student Services
9600 North Torrey Pines Road, Bldg. E
La Jolla, CA 92037-1100, USA

Tel: 858-534-6784

Fax: 858-534-5703

Email: ipadmission@ucsd.edu

www.ip.extension.ucsd.edu

HOW TO APPLY The following items must be enclosed with your application. All documents must be in English.

- 1 Application fee (*non-refundable*)
 - English Language Programs: \$150
 - Academic Connections International: \$200
 - University Credit Programs: \$200
 - Certificate Programs: \$200
- 2 Housing pre-payment (*non-refundable*)
 - Include the on-campus housing application: <http://extension.ucsd.edu/departments/elp/documents/2010oncampushousingapp.pdf>
 - \$500 pre-payment (*non-refundable*) must be included with the on-campus housing application
- 3 Copy of passport name-page
- 4 Financial verification (see page A4)
- 5 Express mail fee, if selected: \$50 (may vary depending on location)
- 6 Copy of medical insurance in English, including dates of coverage
- 7 For English language programs:
 - Intensive Legal English program: Brief statement to explain previous law-related coursework or work experience and purpose of taking this program, and a language proficiency score of 79 iBT, 6.0 IELTS, or advanced proficiency proven by ELI tests which are given upon arrival at UC San Diego.
 - Business English for Professionals: Professional work resume and brief statement describing your English proficiency and use of English on the job.
 - Materials fee (all programs of 1-4 weeks): \$20
- 8 For TEFL Certificate programs:
 - Language proficiency verification
 - Copy of transcripts in English for the two most recent years of academic studies
 - A one-page statement explaining why you would like to take the TEFL Certificate program or the Special Studies in TEFL program or the TEFL Proficiency program.
- 9 For University and Professional Studies (UPS):
 - Language proficiency verification
 - Copy of transcripts in English for the two most recent years of academic studies, with grading key or criteria
 - List of 12 or more preferred courses and alternate courses per quarter that you would like to take at UC San Diego or UC San Diego Extension
 - A one-page statement explaining your reasons for choosing UC San Diego and the extracurricular experiences you hope to have while living in San Diego.
- 10 For Business Certificate programs only:
 - Language proficiency verification
 - A recommendation letter on university or company letterhead from a previous employer or professor
 - Copy of transcripts in English for all years of university study—bachelor's degree preferred; minimum two years required. Include grading key or criteria.
 - Resume or curriculum vitae (CV)
 - A 200-word essay describing (1) your college coursework, (2) work experience, and (3) why you want to take the program
 - All application materials must be received at least three months before the Business program start-date. Please note the maximum capacity limits for each program are reached many months before the program start-date.
- 11 For Academic Connections International (ACI):
 - Please see website for details and supplemental application. Supplemental application will be available in January 2010.

FREQUENTLY ASKED QUESTIONS

A) Do I need a student visa (F-1) to attend your programs? All of our programs, with the exception of the 4-week Conversation and Medical English Online programs, are considered "full-time" and you will need a student visa. If you are going to the U.S. primarily for tourism but want to take a short course of study of less than 18 hours per week, you may be able to do so on a visitor visa. You should inquire at the appropriate U.S. Embassy or Consulate in your country. **You should not schedule a visa interview until you have received our acceptance letter and other acceptance materials.**

B) How much money do I need to study and live in the U.S.? You can calculate your total *estimated* expenses by using the following chart:

Program length	Tuition (fill in amount)	Living expenses*	Other costs**	Total
4 weeks	\$	\$ 1,500	\$ 500	\$
10 weeks	\$	\$ 3,700	\$ 1,200	\$
1 quarter	\$	\$ 4,400	\$ 2,745	\$
2 quarters	\$	\$ 8,700	\$ 5,435	\$
3 quarters	\$	\$ 13,000	\$ 8,135	\$

***Living expenses** include: housing, utilities, food, and incidentals such as clothing and entertainment.

****Other costs** include: student service fees, health insurance, books, supplies, school I.D. and library cards, and transportation, as described in the "Additional Costs" page of our brochure.

Please note that the living expenses and other costs listed above are *estimates* and vary depending on individual housing choices. If you plan to bring your spouse and/or children, your financial verification must include an additional \$500 per month for your spouse and \$300 per month for each child.

C) How long will it take to receive my acceptance information? We will mail your acceptance information as soon as possible after we receive your application with all required documents and fees. For fast delivery, we recommend you choose the express mail option—see Payment Procedure in the application. Applications without express mail take an average of 4-5 weeks for delivery.

D) How do I apply for housing? Refer to our brochure or website for information on housing options available: extension.ucsd.edu/departments/ELP/Housing/housing.html. When you are ready to apply, contact the individual housing vendors for their applications and additional information.

E) What method of payment do I use? Please enclose a money order, or bank draft in U.S. dollars, payable to UC Regents. A bank draft must be drawn on a U.S. bank or a U.S. branch office of your bank. We cannot accept Eurochecks. There is a required fee of \$25 if a bank wire is the payment method. You may also pay by credit card or bank wire—please see Payment Procedure in the application. Please note that a bank wire can take 2-3 weeks for confirmation of payment from our campus bank wire department.

1 PERSONAL INFORMATION (Please print very CLEARLY.)

Family Name (Attach copy of passport name-page)	First Name (as it appears in your passport) <input type="radio"/> Male <input type="radio"/> Female
Country of birth	Country of Citizenship Date of birth month/day/year (e.g. JAN 01, 1979)
Native Language	Student's Email (Please print clearly.) Agent's Email
Student's permanent address in home country (required):	Address to which acceptance should be mailed (required), or <input type="radio"/> I will pick up my acceptance information from your office.
Address Street Apartment Number	Student Name or Agent Name
Address (continued)	Address Street Apartment Number
City Postal Code Country	City Postal Code Country
Telephone (country code/city code/number) Fax (country code/city code/number)	Telephone (country code/city code/number) Fax (country code/city code/number)

2 PROGRAM INFORMATION

I am applying to the following program(s) (check all that apply and indicate start date for each):

I plan to enroll for:

1 session
 2 sessions
 3 sessions
 4 sessions
 not sure

<p>Ten-week English Language Programs Start Date</p> <p> <input type="radio"/> Communication and Culture _____ <input type="radio"/> Intensive Academic _____ <input type="radio"/> Intensive Business English _____ <input type="radio"/> Intensive Legal English _____ <input type="radio"/> Intensive TOEFL _____ <input type="radio"/> Intensive Pre-University _____ <input type="radio"/> Intensive TOEIC _____ <input type="radio"/> Intensive Business Fundamentals _____ </p> <p>Short and Online English Programs</p> <p> <input type="radio"/> Medical English Online I or II (please specify)* _____ <input type="radio"/> Conversation (45 hours)* _____ <input type="radio"/> 4-week Conversation Plus (80 hours) _____ <input type="radio"/> 2-week Conversation Plus (40 hours) _____ <input type="radio"/> Business English _____ <input type="radio"/> Academic English _____ <input type="radio"/> Medical English _____ <input type="radio"/> Business English for Professionals _____ <input type="radio"/> Other _____ </p> <p><small>*This program doesn't qualify for an I-20.</small></p>	<p>University Credit Programs Start Date</p> <p> <input type="radio"/> University and Professional Studies _____ <input type="radio"/> Academic Connections International _____ (Please request special ACI application at ipadmission@ucsd.edu.) </p> <p>Certificate Programs</p> <p>Business Management</p> <p> <input type="radio"/> Academic Year <input type="radio"/> Six-month Program _____ Choose emphasis: <input type="radio"/> Pre-MBA <input type="radio"/> Finance <input type="radio"/> Marketing <input type="radio"/> Human Resources </p> <p> <input type="radio"/> Business Essentials _____ <input type="radio"/> 1 quarter <input type="radio"/> 2 quarters <input type="radio"/> 3 quarters _____ <input type="radio"/> TEFL (6-month) <input type="radio"/> Summer Intensive TEFL _____ <input type="radio"/> Special Studies in TEFL _____ <input type="radio"/> TEFL Proficiency _____ <input type="radio"/> Other _____ </p>
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Have you attended any of our programs before? If so, when? _____

3 TRANSFER STUDENTS

Will you be coming directly from another school in the U.S.? Yes No If yes, you must complete the following:

Name of school	Last date of attendance
Address of school	City State Zip code
School fax number	School telephone number

4 I-20 APPLICATION

Do you need an I-20? YES (please select one) for an F-1 visa for school transfer for change of status

NO (please specify): U.S. Citizen/Permanent Resident Other non-immigrant status (specify) _____

FINANCIAL VERIFICATION

Please check source of your funds: Personal/Own Family Other (specify) _____

A bank statement dated within 90 days indicating the amount of funds available to you in equivalent U.S. dollars must be submitted with your application or you may ask your bank to complete the section below. If you are sponsored by a company or agency, you must submit a letter of sponsorship on the company's letterhead.

Name of account holder	Name of bank
Bank location (city and country)	
Amount of available funds (must exceed or equal amount needed in section B on pg. A2)	Date (within last 90 days)
Name and Title of Bank Official	Signature of Bank Official

Official Bank
Seal/Stamp

The family member or other person who is financially responsible for you must read and sign the statement below. "I have read the information regarding the cost of tuition and living expenses and other costs for the period of study at UC San Diego, Extension. I certify that these funds are available, and I accept full responsibility for these expenses."

Name of person financially responsible (print clearly)	Signature	Relationship to student	Date
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FAMILY MEMBERS

If you plan to bring your spouse and/or children on F-2 visas, you must list them here. Attach additional sheet if more space is needed. Please include copy of passport name-page for each family member.

Family name	Given name	Birthday (e.g., JAN 01, 1997)	Country of birth/Country of citizenship	Relationship to you	<input type="checkbox"/> Male <input type="checkbox"/> Female

5 PAYMENT PROCEDURE

You must submit the non-refundable application fee and express mail fee, if selected, with your application. All other fees must be paid in full 30 days before your program, or you may include full or partial payment now. Please indicate the amounts you are enclosing with this application:

<input type="radio"/> English Language Programs application fee :	<u> \$150 </u>	<input type="radio"/> 3-day express mail delivery of I-20 due with application:	<u> \$50 </u>
<input type="radio"/> Academic Connections International application fee:	<u> \$200 </u>	(Strongly recommended because regular airmail can take 5-6 weeks for delivery. Fee may vary depending on location.)	
<input type="radio"/> University Credit Programs application fee:	<u> \$200 </u>	<input type="radio"/> Bank Wire fee (if this method of payment is chosen):	<u> \$25 </u>
<input type="radio"/> Certificate Programs application fee:	<u> \$200 </u>	<input type="radio"/> Materials fee (for all programs of 1-4 weeks):	<u> \$20 </u>
<input type="radio"/> TEFL late-submission fee (see page 18 for details):	<u> \$100 </u>	<input type="radio"/> Medical insurance from UC San Diego (if selected, see pg. 23 for cost):	<u> \$ </u>
<input type="radio"/> Partial or full tuition amount:	<u> \$ </u>	TOTAL amount enclosed with this application: \$ <u> </u>	
<input type="radio"/> International Student Services fee (see page 23 for details):	<u> \$ </u>		

PAYMENT OPTIONS (Please do not mail cash or traveler's check.)

I have enclosed a money order/bank draft in the amount of \$ _____ (Make checks payable to UC Regents. All checks must be drawn from U.S. banks. Traveler's checks must be signed and endorsed in our presence at UC San Diego.)

I will pay by bank wire, including the \$25 bank wire fee, and I will send the bank wire details to ipfinancials@ucsd.edu to prove my payment.

I would like to pay by credit card (We cannot accept Diners Club.) MasterCard Visa AMEX JCB Total to be charged \$ _____

Credit card number	Expiration date (month/year)
Name on credit card	Authorized signature

6 SIGNATURE (Application cannot be processed without a signature.)

I certify that all application information is true and that I have read and understand the policies described in this application and the Extension International Programs brochure. I acknowledge that I am required to pay the non-refundable application fee even if I decide to withdraw or cancel my enrollment.

Signature of applicant	Date
Please mail/fax completed application:	

By regular post:
University of California, San Diego
Extension International Student Services
9500 Gilman Drive, MC 0176-DD
La Jolla, CA 92093-0176 USA

By express delivery:
University of California, San Diego
Extension International Student Services
9600 North Torrey Pines Road, Bldg. E
La Jolla, CA 92037-1100
By fax: 858-534-5703

REQUIRED FOR REFERRING AGENCY

Agency name	
Contact name	
Fax	Email