

How to Apply

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

1. For all programs, these items must accompany the application:

- A Application fee** (non-refundable for each program)
 - ▶ English Language Programs: \$150
 - ▶ Youth Programs: \$200
 - ▶ University Credit Programs: \$200
 - ▶ Certificate Programs: \$200
- B Copy of passport name page**
- C Financial verification** OR copy of bank statement WITH SPONSOR'S SIGNATURE IN SECTION 4 ON PAGE A4 (IF I-20 IS REQUIRED).
- D Express mail fee**, optional but strongly recommended if the Form I-20 is required: \$50 (may vary depending on location)
- E Academic Verification Form** must be submitted for transfer students along with the application to be considered for transfer. Students may request this form from ipadmission@ucsd.edu.
- F On-Campus Housing Application**, if desired (available July and August only):
 - ▶ Include the on-campus housing application found on our website under the "Housing and Student Life" tab.
 - ▶ Full payment must be included with the on-campus housing application to reserve a space. (See page 28 of the 2020 brochure.)
- G Information Release Form** (optional) for those students who have financial sponsors or who enroll in our programs through a university partnership agreement. Please request the Information Release Form from ipadmission@ucsd.edu.

H We must receive the following at least 30 days before the published program start date:

1. After acceptance is sent, full payment of tuition and fees as invoiced by UC San Diego Extension International Programs.
2. TB Form if required.

Note: For applications received fewer than eight weeks before the program start date, all payments and documents listed in H1-2 (above) must be submitted along with the application.

2. For English language programs:

- ▶ Intensive Legal English program:
 - Applicants must submit academic transcripts for the FOUR most recent semesters of study.
 - Participants must submit a brief statement to explain previous law-related experience and their purpose in taking this program.
 - Applicants must have advanced English proficiency. All students must take the UC San Diego-ELI placement tests upon arrival. However, a score of 85 on the iBT, 7.0 on the IELTS, or a "Pass" on the CAE or the CPE (Cambridge Exams) will fully satisfy the required proof of advanced English proficiency.
- ▶ For University Preparation Academy (UPA), students must submit the following items:
 - University transcripts for the FOUR most recent semesters—must show grades in the top 5–10%. Transcripts must be in English.
 - New students must have a language proficiency score as follows: 80 TOEFL iBT or 6.5 IELTS
 - Continuing students should see the ELI Academic Advisor for program admission requirements.

3. For Academic Connections International (ACI), ESL Youth Program, and Summer University Programs:

- ▶ Please visit our website for details: ip.extension.ucsd.edu.
- ▶ TB Form (see page A6)

4. For University and Professional Studies (UPS):

- ▶ Proof of required language proficiency
- ▶ Copy of transcripts in English for the TWO most recent years (four semesters) of academic studies. These transcripts must clearly indicate excellent academic achievement, including cumulative grade point average (GPA).
- ▶ A one-page statement explaining your reasons for choosing UC San Diego for your study abroad experience.
- ▶ List of 12 or more courses per quarter using our Course List Form, organized by quarter, which you would like to take at UC San Diego or UC San Diego Extension.
- ▶ TB Form (see page A6)
- ▶ Acknowledgement form

5. For Business Certificates:

- ▶ Please see page 20 of the brochure for admission requirements.
- ▶ For the Business Management program, please indicate the program specialization on the application form.
- ▶ TB Form (see page A6)

6. For Paralegal Certificate:

- ▶ Please see page 20 of the brochure for admission requirements.
- ▶ TB Form (see page A6)

7. For TEFL Certificates:

- ▶ Proof of required language proficiency
- ▶ Copy of transcripts in English for the TWO most recent years (four semesters) of academic studies.
- ▶ A one-page statement explaining why you would like to take a TEFL Certificate program.
- ▶ TB Form (see page A6)

If possible, please send page A3 of the application and all supporting documents as one pdf file to ipadmission@ucsd.edu. To protect your credit card information, please send page A4 of the application to our secure fax number: +1-858-534-5703.

A) Do I need to arrive on time for my program to complete registration?

Yes, you must arrive at least one day before the published program start-date. Students who arrive after 4:00 pm on the published start-date of the program must pay a late arrival fee of \$200 USD.

B) Do I need a student visa (F-1) to attend your programs?

If your main intent in coming to the U.S. is to study, you should apply for a student visa. If you are coming to the U.S. mainly for tourism, and you also want to take English classes for your own pleasure or as recreation, then a tourist visa (B-2) or Visa Waiver (WT) is appropriate. If you are not sure whether study or tourism is your main intent, explain your plans to the U.S. Embassy or Consulate in your country and they will advise you on the appropriate visa to apply for. You should not schedule a visa interview until you have received our acceptance letter and other acceptance materials.

C) How much money do I need to study and live in the U.S.?

Please see the Tuition, Fees, and Financial Verification checklist on page A5 of this application form.

D) How long will it take to receive my acceptance information?

We will send your acceptance information as soon as possible after we receive your complete application with all required documents and fees. During peak times, it can take up to three weeks before acceptance documents are sent. For fast delivery, we recommend you choose the express mail option—see Payment Procedure on page A4 of the application. Regular airmail delivery can take an average of 10–12 weeks.

E) How do I apply for housing?

Refer to our brochure or the “Housing and Student Life” tab on our website for information on housing options. When you are ready to apply, contact the individual housing vendors for their application and additional information.

F) What method of payment do I use?

Application and express mail fees must be paid by credit or debit card when you submit your application. All other fees and tuition can be paid with credit card, debit card, money order or bank draft in U.S. dollars. Bank drafts must be drawn on a U.S. bank or U.S. branch office of your bank. We cannot accept Eurochecks or electronic transfers (ACH). You may also pay by bank-to-bank transfer via Western Union Business Solutions. For more information about this method of payment, please email ipfinancials@ucsd.edu. If paying by credit card, please do not send your credit card number to us by email. Please only send your credit card number to our secure fax number: +1-858-534-5703.

G) Am I required to purchase UC San Diego medical insurance?

Yes, you are required to purchase UC San Diego Extension medical insurance. Please see page 27 of the International Programs brochure.

H) Do I have to provide the Tuberculosis (TB) Form?

The Tuberculosis (TB) Form is only required for University Credit, Academic Connections International, and Certificate programs. These include:

- Academic Connections International
- University and Professional Studies
- Summer University Program
- Business Essentials
- Business Management
- Project Management
- Business Analytics
- Digital Marketing
- Leadership and Management
- Paralegal
- TEFL Proficiency
- Special Studies In TEFL
- TEFL Professional Certificate
- TEFL Professional Certificate (Hybrid)
- Any other certificate program

The TB Form is not required for English language programs.

1. PERSONAL INFORMATION

Family Name _____	First Name _____
Birthdate (mm/dd/yr) ____/____/____ E-mail Address _____	

2. THE FOLLOWING DOCUMENTS MUST BE INCLUDED WITH THIS APPLICATION:

<input type="checkbox"/> UC San Diego Extension International Program application pages A3-A4 (extension.ucsd.edu/international-programs/how-to-enroll) <input type="checkbox"/> Proof of English proficiency: TOEFL (iBT) 83, IELTS 7.0, Advanced Cambridge: PASS, CEFR level C1 <input type="checkbox"/> Copy of transcripts in English for the two most recent years (four semesters) of academic studies <input type="checkbox"/> A one-page statement explaining your reasons for choosing UC San Diego for your study abroad experience. <input type="checkbox"/> Payment in full <input type="checkbox"/> Proof of available funds (showing a minimum of \$9050 USD for each full-time session) if I-20 is required <input type="checkbox"/> Acknowledgement form

3. THE FOLLOWING DOCUMENTS MUST BE RECEIVED 30 DAYS BEFORE THE PUBLISHED PROGRAM START-DATE:

<input type="checkbox"/> Medical Insurance: Student will purchase UC San Diego medical insurance for \$270 USD per session
<input type="checkbox"/> Tuberculosis (TB) Questionnaire/Assessment (page A6 of the Extension International Programs application)

4. COURSES SELECTION:

- Go to students.ucsd.edu to see which classes are offered for SSI and SII. Under "Enrollment Tools," select "Full Schedule of Classes." **NOTE:** Summer Session courses will not be available to view until March 2020.
- You must have completed all course prerequisites for each class you select.
- Check that each class you select does not have a time conflict with other classes you select (after March 2020).
- Select alternate classes in the event that your first-choice classes are unavailable.
- Check each section I.D. number carefully to make sure it correlates with the course you want to enroll into.
- Full-time students: select 2 classes and 2 alternate classes.
- Part-time students: select 1 class and 1 alternate class.

SUMMER UNIVERSITY PROGRAM, SESSION I								
	Department	Course Number	Section I.D. Number					
<i>Example Class 1</i>	<i>BILD 3</i>	<i>3</i>	<i>4</i>	<i>8</i>	<i>1</i>	<i>8</i>	<i>4</i>	<i>6</i>
Class 1								
Alternate Class								
Class 2								
Alternate Class								
SUMMER UNIVERSITY PROGRAM, SESSION II								
Class 1								
Alternate Class								
Class 2								
Alternate Class								

5. FEE CALCULATION: SOME CLASSES REQUIRE ADDITIONAL FEES. IF YOU NEED TO PAY EXTRA FEES, WE WILL INFORM YOU AFTER CLASS ENROLLMENT.

ENROLLMENT FOR VISITING AND INTERNATIONAL STUDENTS BEGINS APRIL 2020. To ensure you obtain your choice in courses, please apply early to solidify your schedule in April 2020, at the start of open enrollment for visiting and international students. International students may review courses beginning March 2020 (the date that UC San Diego students begin enrolling into Summer Session). International students may not enroll into courses until April 2020.

<p>CHECK THE APPROPRIATE BOXES:</p> <p>FT = Full-time, 8 units PT = Part-time, 4 units</p> <p>Application Fee: <u>Optional</u> 3-day express mail (delivery of acceptance materials) International Student Service fee (<i>\$380 USD per 5-week session</i>) UC San Diego Medical Insurance (<i>\$270 USD per 5-week session</i>) Total tuition (<i>\$6075 FT or \$4925 PT per session</i>) Total amount to be paid by credit card:</p> <p>Credit Card Number _____ CARDHOLDER'S NAME _____</p> <p style="font-size: small;">Express delivery: UCSD Extension Bldg. E, 9600 N. Torrey Pines Road, La Jolla, CA 92037, U.S.A, Tel: +1(858) 534-6784 Fax: +1(858) 534-5703</p>	<p>Session I <i>June 26 – Aug 1</i></p> <p><input type="checkbox"/> FT: \$6075 USD <input type="checkbox"/> PT: \$4925 USD</p>	<p>Session II <i>July 31 – Sept. 5</i></p> <p><input type="checkbox"/> FT: \$6075 USD <input type="checkbox"/> PT: \$4925 USD</p>	<p>Payment Method:</p> <p><input type="checkbox"/> Check or money order enclosed payable to UC Regents <input type="checkbox"/> Credit Card ____ Visa ____ MasterCard ____ JCB ____ AMEX</p> <p>\$ _____ 200 USD \$ _____ 50 USD \$ _____ USD \$ _____ USD \$ _____ USD \$ _____ USD</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">IF PAYING BY CREDIT CARD, SEND THIS FORM BY FAX TO: +1-858-534-5703</p> <p>Expiration Date (mo/yr) _____ CARDHOLDER'S SIGNATURE _____</p>
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6. NOTE ABOUT MANDATORY SUMMER UNIVERSITY PROGRAM ORIENTATION:

<input type="checkbox"/> SUMMER UNIVERSITY PROGRAM, SESSION I: FRIDAY, JUNE 26, 2020 (classes begin Monday, June 29, 2020) <input type="checkbox"/> SUMMER UNIVERSITY PROGRAM, SESSION II: FRIDAY, JULY 31, 2020 (classes begin Monday, August 3, 2020)
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1. Personal Information (Please print very CLEARLY and read instructions on page A1. Incomplete applications will not be processed and will be sent back to the student or agent. PLEASE NOTE: Hanmail, Hotmail, Daum, and Naver email accounts are blocked by UC San Diego email.)

Family Name (surname) <small>(ATTACH COPY OF PASSPORT NAME PAGE)</small>	First Name (given name) <small>(as it appears in your passport)</small>	<input type="checkbox"/> Male <input type="checkbox"/> Female
Country of Birth	Date of Birth month/day/year (e.g. JAN 01, 1990)	
Country of Citizenship	Student's Email (Please print clearly.)	
Native Language	Agent's Email (Please print clearly.)	

Student's permanent address in home country (required):
 Check here if this is where you want your I-20 and acceptance materials to be mailed.

Address	Street	Apartment Number
Address (continued)		
City	Postal Code	Country
Telephone (country code/city code/number)		

<input type="checkbox"/> I will pick up my acceptance information from the UC San Diego Extension office, Bldg E, OR		
<input type="checkbox"/> Address to which I-20 and acceptance materials should be mailed:		
Student Name or Agency Name		
Address	Street	Apartment Number
City		
City	Postal Code	Country
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

2-Week and 4-Week English Language Programs	Start-Date	Professional Certificate Programs	Start-Date
<input type="checkbox"/> Conversation	<input type="checkbox"/> part-time* _____	<input type="checkbox"/> Business Essentials (1 quarter)	_____
<input type="checkbox"/> Conversation and Fluency	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Business Essentials (2 quarters)	_____
<input type="checkbox"/> University Preparation Academy	_____	<input type="checkbox"/> Business Essentials (3 quarters)	_____
<input type="checkbox"/> Business English	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Business Analytics (1 quarter)	_____
<input type="checkbox"/> Legal English for Business	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Digital Marketing (1 quarter)	_____
<input type="checkbox"/> English for Engineering & Technology	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Leadership and Management (1 quarter)	_____
<input type="checkbox"/> English for Pharmaceutical Sciences	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Add business project for an additional \$1,000 USD.	
<input type="checkbox"/> Medical English	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Leadership and Management Business Project	_____
<input type="checkbox"/> 4-week Academic English	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	<input type="checkbox"/> Business Management (2 quarters)	_____
<input type="checkbox"/> 2-week Academic English	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____	Please choose specialization:	
		<input type="checkbox"/> Finance <input type="checkbox"/> Marketing <input type="checkbox"/> Leadership	_____
		<input type="checkbox"/> Business Management (3 quarters)	_____
		Please choose specialization:	
		<input type="checkbox"/> Finance <input type="checkbox"/> Marketing <input type="checkbox"/> Leadership	_____
		<input type="checkbox"/> Project Management (2 quarters)	_____
		Add Lean Six Sigma Green Belt for an additional \$3,000 USD.	
		<input type="checkbox"/> Lean Six Sigma Green Belt	_____
		<input type="checkbox"/> Paralegal (1 quarter)	_____

8-Week Language Programs

<input type="checkbox"/> Communication and Culture	<input type="checkbox"/> full-time <input type="checkbox"/> part-time* _____
<input type="checkbox"/> Intensive Communication and Culture	_____
<input type="checkbox"/> Intensive Academic English or <input type="checkbox"/> part-time Academic English*	_____
<input type="checkbox"/> Intensive TOEFL Preparation	_____
<input type="checkbox"/> Intensive IELTS Preparation	_____
<input type="checkbox"/> Intensive Legal English	_____

Youth Programs

<input type="checkbox"/> American University Experience*	_____
<input type="checkbox"/> Academic Connections International*	_____

University Credit Programs

<input type="checkbox"/> University and Professional Studies	_____
<input type="checkbox"/> Summer University Program, part-time*	_____
<input type="checkbox"/> Summer University Program, full-time	_____

TEFL Certificate Programs

<input type="checkbox"/> TEFL Proficiency	_____
<input type="checkbox"/> Special Studies In TEFL	_____
<input type="checkbox"/> TEFL Professional (6-MONTH FORMAT)	_____
<input type="checkbox"/> TEFL Professional (HYBRID FORMAT)	_____

*Part-time programs do not qualify for a Form I-20.

How did you learn about our programs? Agent University Friend or Family Other _____

3. Transfer Students Will you be coming directly from another school in the U.S.?

- No. If no, we need no further information regarding your transfer status.
- Yes. If yes, you must submit the UC San Diego Extension International Programs Academic Verification Form with the application to be considered for transfer.
 Students may request the Academic Verification Form from ipadmission@ucsd.edu.

Current school name _____ Telephone _____ Dates of attendance (Start & End) _____

4. I-20 Request

Student's FAMILY name (surname)

FIRST name (given name)

Do you need an I-20? YES. If yes, please select one: _____ for an F-1 visa _____ for school transfer _____ for change of status
 NO, I do not need an I-20. I am (please check one): _____ U.S. Citizen/Permanent Resident _____ Other non-immigrant status (specify) _____

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

A. REQUIRED FOR I-20: A bank statement or signed letter of sponsorship in English by an approved company or school, dated within the last 90 days and showing enough funds for all programs which the student is applying to, plus living expenses and other costs. Please see Tuition, Fees, and Financial Verification on page A5 of the application form to determine total funds needed. If the bank statement is in a foreign currency, it must show enough funds when converted to U.S. dollars.

Name of account holder _____ Name of bank _____
 Bank location (city and country) _____
 Amount of available funds in equivalent U.S. dollars _____ Date (within last 90 days) _____
 (must equal or exceed program amount specified on page A5)
 Name and Title of Bank Official _____ Signature of Bank Official _____



B. REQUIRED FOR I-20: The family member or other person who is financially responsible for you must read this statement and sign 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 (m/d/y) _____

Dependents If you plan to bring your spouse (wife or husband) 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. (Parents and siblings are not considered dependents.)

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. Application fee/express mail fee must be paid by credit card. All other fees must be paid in full 30 days before your program, or you may include full or partial payment now. Payment for the UC San Diego photo ID card and for textbooks CANNOT be made in advance and can only be purchased after arrival at UC San Diego Extension International Programs. Please indicate the amount you are enclosing with this application:

<input type="checkbox"/> English Language Programs application fee:	\$150	<input type="checkbox"/> 3-day express mail delivery of I-20 due with application:	\$50
<input type="checkbox"/> Youth Programs application fee:	\$200	(Strongly recommended because regular airmail can take 10–12 weeks for delivery. Fee may vary depending on location.)	
<input type="checkbox"/> University Credit Programs application fee:	\$200	<input type="checkbox"/> Medical insurance from UC San Diego Extension (see pg. A5):	\$
<input type="checkbox"/> Certificate Programs application fee:	\$200	<input type="checkbox"/> Program change fee:	\$150
<input type="checkbox"/> Partial or full tuition amount (ESL programs only):	\$	<input type="checkbox"/> Other:	_____
<input type="checkbox"/> International Student Services fee (see pg. A5):	\$	TOTAL amount enclosed with this application: \$ _____	

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

I have enclosed a money order/cashier check in the amount of \$ _____ (Checks must be drawn on a U.S. bank and payable to UC Regents.)

I would like to pay by credit card. If paying by credit card, write your full name at the top of this page and send it to our secure fax.

Do not send your credit card number by email. MasterCard Visa AMEX Diners Club Discover

_____ \$ _____
 Credit card number _____ Expiration date (month/year) _____ Total to be charged _____
 Name on credit card _____ Authorized card holder's signature _____

6. Signature (Application cannot be processed without a student signature.) I certify that all application information is true and that I have read and understand the policies described in this application and the UC San Diego 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 fax, express mail, or email completed application and required documents to:

Express Delivery Address: Fax: +1-858-534-5703
 University of California San Diego Email: ipadmission@ucsd.edu
 Extension International Student Services ip.extension.ucsd.edu
 9600 N. Torrey Pines Road, Bldg. E
 La Jolla, CA 92037-1100

REFERRING AGENCY/UNIVERSITY (REQUIRED TO DOCUMENT STUDENT REFERRAL)

Agency/University name	
Contact name	
Fax	Email

Tuition, Fees, and Financial Verification Checklist

		Application Fee	Full-Time Programs (F-1 visa)						Part-Time Programs (tourist visa or ESTA)			
			Express Mail (optional)	Tuition*	ISS Fee	Medical Insurance	Total to UCSD	Student Visa Financial Verification**	Tuition*	ISS Fee	Medical Insurance	Total to UCSD
CONVERSATION	1	\$150	–	–	–	–	–	–	\$1,500	\$175	\$180	\$2,005
CONVERSATION AND FLUENCY	2	\$150	\$50	\$2,000	\$175	\$180	\$2,555	\$4,100	\$1,800	\$175	\$180	\$2,305
UNIVERSITY PREPARATION ACADEMY	3	\$150	\$50	\$2,300	\$175	\$180	\$2,855	\$4,400	–	–	–	–
BUSINESS ENGLISH	4	\$150	\$50	\$2,300	\$175	\$180	\$2,855	\$4,400	\$2,050	\$175	\$180	\$2,555
LEGAL ENGLISH FOR BUSINESS	5	\$150	\$50	\$2,300	\$175	\$180	\$2,855	\$4,400	\$2,050	\$175	\$180	\$2,555
ENGLISH FOR ENGINEERING AND TECHNOLOGY	6	\$150	\$50	\$2,600	\$175	\$180	\$3,155	\$4,700	\$2,300	\$175	\$180	\$2,805
ENGLISH FOR PHARMACEUTICAL SCIENCES	7	\$150	\$50	\$2,600	\$175	\$180	\$3,155	\$4,700	\$2,300	\$175	\$180	\$2,805
MEDICAL ENGLISH	8	\$150	\$50	\$2,600	\$175	\$180	\$3,155	\$4,700	\$2,300	\$175	\$180	\$2,805
ACADEMIC ENGLISH (4-WEEK)	9	\$150	\$50	\$2,000	\$175	\$180	\$2,555	\$4,100	\$1,800	\$175	\$180	\$2,305
ACADEMIC ENGLISH (2-WEEK)	9	\$150	\$50	\$1,200	\$175	\$90	\$1,665	\$2,550	\$1,000	\$175	\$90	\$1,415
COMMUNICATION AND CULTURE	10	\$150	\$50	\$3,100	\$380	\$450	\$4,130	\$7,150	\$2,900	\$380	\$450	\$3,880
INTENSIVE COMMUNICATION AND CULTURE	11	\$150	\$50	\$3,500	\$380	\$450	\$4,530	\$7,550	–	–	–	–
INTENSIVE ACADEMIC ENGLISH (OR PART-TIME)	12	\$150	\$50	\$3,500	\$380	\$450	\$4,530	\$7,550	\$3,000	\$380	\$450	\$3,980
INTENSIVE TOEFL PREPARATION	13	\$150	\$50	\$3,500	\$380	\$450	\$4,530	\$7,550	–	–	–	–
INTENSIVE IELTS PREPARATION	14	\$150	\$50	\$3,500	\$380	\$450	\$4,530	\$7,550	–	–	–	–
INTENSIVE LEGAL ENGLISH	15	\$150	\$50	\$4,000	\$380	\$450	\$5,030	\$8,050	–	–	–	–
AMERICAN UNIVERSITY EXPERIENCE	16	\$200	–	–	–	–	–	–	\$3,900	\$175	\$90	\$4,365
ACADEMIC CONNECTIONS INTERNATIONAL	17	\$200	–	–	–	–	–	–	\$6,400	\$175	\$135	\$6,910
UNIVERSITY AND PROFESSIONAL STUDIES	18	\$200	\$50	\$7,800	\$380	\$585	\$9,015	\$12,250	–	–	–	–
SUMMER UNIVERSITY PROGRAM I OR II (5 WEEKS, FULL-TIME)	19	\$200	\$50	\$6,075	\$380	\$270	\$6,975	\$9,050	–	–	–	–
SUMMER UNIVERSITY PROGRAM I OR II (5 WEEKS, PART-TIME)	19	\$200	–	–	–	–	–	–	\$4,925	\$380	\$270	\$5,775
BUSINESS ESSENTIALS (1 QUARTER)	20	\$200	\$50	\$6,000	\$380	\$585	\$7,215	\$10,450	* Additional fees may be required for some programs. Please ask at ipinfo@ucsd.edu .			
BUSINESS ESSENTIALS (2 QUARTERS)	20	\$200	\$50	\$12,000	\$760	\$1,170	\$14,180	\$22,200				
BUSINESS ESSENTIALS (3 QUARTERS)	20	\$200	\$50	\$18,000	\$1,140	\$1,800	\$21,190	\$34,000	** Financial Verification is the estimated total amount a student will need to study and live abroad for the duration of their program. This verification is required for the Form I-20. It includes an estimate cost of books and materials, transportation, housing, food and incidentals. 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.			
BUSINESS ANALYTICS (1 QUARTER)	21	\$200	\$50	\$7,000	\$380	\$585	\$8,215	\$11,450				
DIGITAL MARKETING (1 QUARTER)	22	\$200	\$50	\$6,200	\$380	\$585	\$7,415	\$10,650				
LEADERSHIP AND MANAGEMENT (1 QUARTER)	23	\$200	\$50	\$6,000	\$380	\$585	\$7,215	\$10,450				
BUSINESS MANAGEMENT (2 QUARTERS)	24	\$200	\$50	\$12,000	\$760	\$1,170	\$14,180	\$22,200				
BUSINESS MANAGEMENT (3 QUARTERS)	24	\$200	\$50	\$18,000	\$1,140	\$1,800	\$21,190	\$34,000				
PROJECT MANAGEMENT (2 QUARTERS)	25	\$200	\$50	\$12,000	\$760	\$1,170	\$14,180	\$22,200				
PARALEGAL	26	\$200	\$50	\$9,000	\$380	\$585	\$10,215	\$11,250				
TEFL PROFICIENCY	27	\$200	\$50	\$5,950	\$380	\$585	\$7,165	\$11,300				
SPECIAL STUDIES IN TEFL	28	\$200	\$50	\$4,750	\$380	\$585	\$5,965	\$10,100				
TEFL PROFESSIONAL (6-MONTH FORMAT)	29	\$200	\$50	\$8,300	\$760	\$1,170	\$10,480	\$18,200				
TEFL PROFESSIONAL (HYBRID FORMAT)	30	\$200	\$50	\$4,750	\$380	\$585	\$5,965	\$10,100				

Tuberculosis (TB) Questionnaire

University Credit, Academic Connections International, and Certificate program students are required to fill out and return this form 30 days before the program start-date. Please send this questionnaire to iphealth@ucsd.edu or fax it to +1-858-534-5703.

Family Name of participant _____ First Name of participant _____

Date of Birth month/day/year _____ Student's Email (Please print clearly.) _____

Please answer the following questions:

- Have you ever had a positive TB skin or blood test? Yes No
- Have you ever had close contact with anyone who was sick with TB? Yes No
- Are you from or have you ever lived or traveled in one of the following areas:**
Mexico, South or Central America, Eastern Europe, Asia, the Middle East, or Africa? Yes No

If all questions are answered **NO**, you have completed your TB Assessment.

If you have answered **YES** to any of the questions above, a licensed health care provider must fill out questions 1-3 AND document negative TB test results or treatment (questions 4-7), even if you have had the BCG Vaccine.

Tuberculosis (TB) Assessment

This part of the form must be completed only by a licensed health care provider. If TB results are required, the TB test must be taken no more than 1 year from the program start-date.

RISK FACTORS: (please ask student and check any that apply)

1. Immunosuppressed (HIV/AIDS), organ transplant, or on immunosuppressant medication Yes No
2. History of abnormal chest x-ray suggestive of TB disease Yes No
3. Does the student have signs or symptoms of active tuberculosis disease? Yes No
 (Cough more than 3 weeks, chest pain, unexplained weight loss, fevers, night sweats)

4. Tuberculin Skin Test (TST)

If there is no history of BCG Vaccine, TST results should be recorded as millimeters (mm) of induration. If no induration, write "0." Five mm is considered positive if there is a history of abnormal chest x-ray, recent exposure to active TB disease, or is immunosuppressed. 10 mm induration is considered positive if coming from a high-risk area or has other high-risk conditions (IV drug use, chronic renal disease, cancer, diabetes, malabsorption or GI bypass).

- Date TST test was given: _____
month/ day/ year
- Date TST test was read: _____
month/ day/ year
- Result: _____ mm induration
- Interpretation: negative positive

5. TB Blood Test (Interferon Gamma Release Assay-IGRA)

(The TB blood test may be done instead of TST. Strongly recommended if there is a history of positive TST or BCG vaccination.)

- Date obtained: _____
month/ day/ year
- Result: negative positive intermediate

6. Chest X-Ray (required if TST or IGRA is positive)

- Date of chest x-ray: _____
month/ day/ year
- Result: normal abnormal (including scars, and old granulomatous changes)
- If chest x-ray is abnormal, please submit the following results.
Sputum Results (AFB and culture x 3 required if chest x-ray abnormal):
- #1 Date _____ AFB _____ Culture _____
- #2 Date _____ AFB _____ Culture _____
- #3 Date _____ AFB _____ Culture _____

7. Treatment for Latent TB (if applicable):

- Medication(s) _____
- Start date: _____
month/ day/ year
- Completion date: _____
month/ day/ year

Licensed healthcare provider's name (please print in block letters): _____

Healthcare provider's signature: _____ Date: _____

month/ day/ year

Healthcare provider's stamp:



EXTENSION INTERNATIONAL PROGRAMS
 UCSD EXTENSION, 0176 D
 Tel: (858) 822-1292 Fax: (858) 534-5703
 e-mail: ups-program@ucsd.edu

9500 GILMAN DRIVE
 LA JOLLA, CALIFORNIA 92093-0000

<http://ip.extension.ucsd.edu>

AUTHORIZATION TO CREATE STUDENT ACCOUNT

Student Name: _____

Date of Birth: _____

Dear Summer University Program Applicant:

Thank you for your application. Before we can process your application for admission to the Extension Summer University Program, you must indicate that you understand and accept all of the statements listed below.

Please put your initials after each statement to indicate that you understand and agree to these terms of enrollment and fax it back to us at (858) 534-5703 or email it to ups-program@ucsd.edu, Attn: Megan Schuck or Valerie Nickels.

STATEMENT	INITIALS
I give permission to my Extension Summer University Program advisor to create a Summer Session student account on my behalf.	
I understand that my advisor will create a unique password for me and provide it to me so that I can change it at a later date.	
I understand that I must be enrolled in 8 units in order to be considered full-time and to maintain my student visa status.	
Enrollment into classes will be completed by my advisor on a space-available basis.	
Any requests for changes must be approved by my advisor in advance.	

My initials above indicate that I understand and accept each of the statements above.

 Signature

 Date