## **Application for Enrollment**

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Pastion 1: Darson	al Informa		terms you wish	-			
Section 1: Personal Inform  Last Name (Family Name)		First:		Т)	Middle:		
Last Name (Family Name)		FIISt.		ivildale.			
Sex:	Married:	Date	e of Birth:		Highest	Certificat	e or Degree Earned:
□Male □Female	□Yes	□No Mon	th: Day:	Year:			
			n? □Yes □No	-,	hat do you pl		•
ENGLISH LEVEL:		ing (○ No En	glish ○ Some E	nglish <i>)</i>	□ Intermed		☐ Advanced
ENGLISH LEVEL:  City and Country of Permanent Home A Street:	Birth:	ing (○ No En	glish ○ Some E		□ Intermed		☐ Advanced
City and Country of Permanent Home A	Birth:	ing (○ No En	glish ⊙ Some E Country o	nglish <i>)</i>	□ Intermed	diate	□ Advanced
City and Country of Permanent Home A Street:	Birth:		glish o Some E  Country o	nglish <i>)</i>	☐ Intermed	diate	□ Advanced
City and Country or Permanent Home A Street: City: Fax: How did you hear a	Birth: ddress	State/Provin Phone numb	glish o Some E  Country o  ce:  per:  ge Institute?	nglish) f Citizenship	□ Intermed	diate	
City and Country or Permanent Home A Street: City:	Birth: ddress	State/Provin Phone numb	glish o Some E  Country o  ce:	nglish) f Citizenship	□ Intermed	diate	

### Program Cost (Estimated) \*Does not include transportation cost.

TERM:	SPRING	SUMMER	FALL	
ELI Tuition:	\$3,000.00	\$3,000.00	\$3,000.00	
ELI Registration Fee (per term):	\$52.00	\$52.00	\$52.00	
University Fees:	\$403.00	\$315.50	\$403.00	
*Living Expenses:	\$3,600.00	\$3,600.00	\$3,600.00	
Books:	\$200.00	\$200.00	\$200.00	
TOTAL:	\$7,255.00	\$7,167.50	\$7,255.00	

# Don't forget to include with application: All Applicants

Sign Application

- ∘ Complete and Sign Medical History Form ∘ UOG Student Health Service form signed by Medical Doctor/Nurse
- \$352.00 Registration/Application Fee (Non-Refundable) -Make Money Order or Check payable to *University of Guam/ELI* –To pay by credit card, please fill out *Authorization for Credit Card Payment* form

#### For I-20/F1

Copy of Current Passport & Passport of Dependant(s) if any ○ Copy of Bank statement(s) translated in English & US Currency (\$) ○ Provide Proof of Medical/Health Insurance upon approval of F-1 visa for the duration of ELI Term(s)

Application for transfer only: Please submit transfer information sheet from your current school I-20 and I-94
Please mail the application to: UOG/ELI, UOG Station, Mangilao, Guam 96923 or fax to: (671)734-1233
Or EMAIL to: elienglish@triton.uog.edu

### Section 2: Application for I-20:

Form I-20 is a federal document that states that a foreign student is able to pay for the cost of studying at our institute. Applicants need Form I-20 to apply for a student visa (F-1 visa). Your F-1 Visa will permit you to enter Guam in order to study at the University of Guam (UOG), English Language Institute (ELI). To issue an I-20, Sections 2. 3 & 4 must be completed.

Lead to apply for a						
I need to apply for a						
Student Visa (F-1)	If "Vee" How Menu					
Are you bringing in dependent(s) with you?   Yes   No  Provide evidence that approximately \$4,000 per term/per dependent is available above the						
	Citizenship Relationship Gender					
Name Birth Date Oity and Country of Birth C	Nelationship Gender					
T ( 100 (0 1 ") T ( 1 ( 1 " 0 1 ")						
□ Transfer I-20 (Submit Transfer Information Sheet)						
☐ Change of Visa Status – What is your current status on Guam?						
Letter of admission and I-20 should be sent to: (if different from perm	nanent home address)					
Last Name (Family Name): First:	Middle:					
Street:						
	Doctol Code:					
City: State/Province:	Postal Code:					
Fax: Phone number:	E-mail:					
STATEMENT OF FINANCIAL RESPON	SIBILITY					
Section 3: Source of Funds / Financial Guarantee Information	<u>n</u>					
studying at the University of Guam English Language Institute. Fees must be paid in full at registration. Please attach a recent statement of financial guarantee from your bank, your family's bank, or from your sponsor's bank. This statement should confirm that you have at least \$6,849.00 for EACH TERM you will study with us. Source of funds (please check all that apply):						
☐ Personal Funds Amount Guarantee	ed: \$					
□ Parent - <i>Name</i> :	\$					
□ Sponsor - Name:	\$					
	Φ					
Relationship to Student:						
I certify that the above information is correct, that I intend to register for this program if admitted, and that the funds to support my study are available and will be provided as required.						
Signature of Applicant	Date					
Section 4: Sponsorship Letter – (You do not have to fill this section if y						
Applicants must have their parent/sponsor complete the section below or the funds are available and will be provided as required. Bank statement(	send a separate letter to us certifying that					
Applicants must have their parent/sponsor complete the section below or	send a separate letter to us certifying that (s) must be attached to guarantee funds.  student named in this application while					
Applicants must have their parent/sponsor complete the section below or the funds are available and will be provided as required. Bank statement(  The undersigned agrees to be fully responsible for all expenses for the	send a separate letter to us certifying that (s) must be attached to guarantee funds.  student named in this application while m.					
Applicants must have their parent/sponsor complete the section below or the funds are available and will be provided as required. Bank statement(  The undersigned agrees to be fully responsible for all expenses for the the student is in the English Language Institute at the University of Gua	send a separate letter to us certifying that (s) must be attached to guarantee funds.  student named in this application while im.					

Date

Signature of Sponsor

Authorization for credit card payment of:  \$352.00 Registration/Application Fee  (Non Refundable)							
ELI Term:	☐Fall 2022	☐Spring 2023	□Summer 2023 □Fall 20	)23			
<u>Complete this information</u> : ☐ MasterCard ☐ Visa ☐ Amex ☐ Other							
Account Number Expiration Date 3Digit Verification No.							
Cardholder's	Name	Ca	rdholder's Signature				
				DIGIT VERIFICATION NUMBER			