

# ALLEN COMMUNITY COLLEGE

## INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

International Student Admissions 1801 N Cottonwood St, Iola, KS 66749 Phone: 620-901-6240

Full Name \_\_\_\_\_  Male  
Last (family name) First (given) Middle  Female

Present Mailing Address:

Permanent Mailing Address:

\*Mailing address is required for application to be processed

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**E-mail address** \_\_\_\_\_

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Telephone #: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Month/Day/Year

Place of Birth \_\_\_\_\_  
City/Country

Country of Citizenship \_\_\_\_\_

Native Language \_\_\_\_\_

TOEFL/Duolingo Score \_\_\_\_\_ (Please have ETS submit your scores to college code 6305)

Semester entering Allen :  Fall (August) 20\_\_\_\_  Spring (January) 20\_\_\_\_  Summer (June) 20\_\_\_\_

Location:  Iola  Online

**MAJOR FIELD OF STUDY** \_\_\_\_\_

During your first semester at Allen you will be a student

- Who is still in high school  
 Attending college for the first time since receiving a high school diploma or GED  
 Who has attended another college or university since receiving a high school diploma or GED  
 Not seeking a degree but taking classes at Allen for personal improvement  
 Seeking a degree from a different institution while taking classes at Allen  
 Other

My educational goal is

- To complete a degree or certificate at Allen and transfer to another institution
- To complete a degree or certificate at Allen and enter the workforce
- To take courses at Allen before seeking a degree at another institution
- To take courses at Allen while seeking a degree at another institution
- To take courses for self-improvement
- To take courses to improve skills for present job or prepare for a job change

In case of emergency, who should be notified?

Address	Name	Relationship	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

<b>Educational History: Please list all high school/universities you have previously attended</b>			
Name of School	City and Country	Dates Attended	Diploma/Certificate/Hours Received

**Note to Applicant:** I hereby affirm that all information supplied on this form is complete and accurate. It is my understanding that I shall not be considered for admission until I have submitted all of the requested records including: application for admission, statement of finance, translated high school/university transcripts, and proof of English proficiency. It is my understanding that I will not receive a Form I-20 until all required documents have been submitted, and the Office of Student Life has received the housing application and dorm deposit.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Allen Community College is committed to a policy of nondiscrimination on the basis of race, sex, national origin, religion, age, and disability in admissions, educational programs or activities, and employment; all as required by applicable laws and regulations under the Title VI Civil Rights Act of 1964, the Title IX Regulations of 1972, and Section 504 of the Social Rehabilitation Act of 1973. Responsibility for coordination of compliance and receipt of inquiries has been delegated to the Vice President for Student Affairs, Allen Community College, 1801 North Cottonwood Street, Iola, Kansas 66749, 620-365-5116, [vpsa@allenc.edu](mailto:vpsa@allenc.edu), [www.allenc.edu](http://www.allenc.edu)