



## International Student Application

*Thank you for choosing Olympic College as your study destination!*

**To apply, please submit ALL documents listed below to:**

**International Student Programs**

**Olympic College**

**1600 Chester Avenue**

**Bremerton, WA 98337-1699 U.S.A.**

Phone: 1-360-475-7718/Fax: 1-360-475-7202

E-mail: [international@olympic.edu](mailto:international@olympic.edu)

### Application Check List

- \_\_\_\_\_ Completed application form and “Statement of Financial Responsibility” signed and dated.
- \_\_\_\_\_ \$35(US) Application fee (check, money order, credit card)
- \_\_\_\_\_ Affidavit of support (This is necessary only if someone other than student is responsible for financial support.)
- \_\_\_\_\_ Official bank statement that indicates financial ability to fund at least one academic year in the USA, currently \$16,239. (This must be in English on original official bank letterhead)
- \_\_\_\_\_ Official transcripts from all high schools, colleges, or universities attended. Transcripts must be translated into English, signed and sealed. If a translation service is used, the translated document and the original transcript must be sent to the above address.
- \_\_\_\_\_ Copy of valid passport
- \_\_\_\_\_ Proof of health insurance –Health insurance is required upon arrival, and may also be purchased at Olympic College.
- \_\_\_\_\_ **(Optional)** English proficiency: TOEFL, IELTS, Cambridge, STEP-Eiken score reports
- \_\_\_\_\_ **(For Transfer student only):** Previous enrollment form, copies of passport, visa, and I-20 from previous school

OFFICE USE ONLY

SID # 860 – \_\_\_\_\_ – \_\_\_\_\_

Application Received \_\_\_\_\_

PLEASE TYPE OR PRINT

Personal Information

Family name/Surname      First name      Middle name      Male/female

Date of birth (month/day/year)      Country of birth      Country of citizenship

Email address (REQUIRED) \_\_\_\_\_  
(    ) single (    ) married

Native language \_\_\_\_\_ Marital status \_\_\_\_\_  
Are you bringing dependant(s) with you ? (    )No (    )Yes

Home Address

Street address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal code \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_  
U.S. Address (if known): \_\_\_\_\_ Are you currently in the United States? (    )Yes (    )No

Street address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_ Postal code \_\_\_\_\_

Country \_\_\_\_\_ Phone \_\_\_\_\_

List all high schools colleges and universities attended.

Name of school /country	From(Mo/Yr)	To (Mo/Yr)	Degree/Diploma	Major(if applicable)

### Program Information

**When you plan to begin:** Year ( )

( ) Fall-September ( ) Winter-January ( ) Spring-March ( ) Summer-June

**Which program you are applying for? Please check ALL that apply:**

( ) Intensive English (ESL) ( ) University Transfer (AA/AS degree) or Associate in Technical Arts

( ) High School Diploma Program ( ) Other (please specify: \_\_\_\_\_)

**What subject (major) do you want to study at Olympic College?** \_\_\_\_\_

**How long do you want to study at OC?** ( ) 2 years or longer ( ) 1 year ( ) 6 months or less

**Are you interested in university transfer admission guarantee through one of our partner schools\*?**

( ) Yes ( ) No \*Please contact our office for the most recent list of partner schools.

### Reference information

How did you hear about Olympic College?

Agency \_\_\_\_\_ Book/magazine \_\_\_\_\_ Website \_\_\_\_\_

Friend or relative (name/relationship?) \_\_\_\_\_

Educational fair (where and when?) \_\_\_\_\_

Other \_\_\_\_\_

### Mailing Option-Where to send your admission packet

( ) Home address ( ) United States address ( ) Will be picked up by: \_\_\_\_\_  
(Name)

( ) Agency or other mailing address (if applicable)

Agency: \_\_\_\_\_ Contact person: \_\_\_\_\_

Street address \_\_\_\_\_

City \_\_\_\_\_

State/Province \_\_\_\_\_

Postal code \_\_\_\_\_

Country \_\_\_\_\_

Phone/email \_\_\_\_\_

### Housing Preference

( ) I want to apply for the Homestay program with Olympic College, please send an application\*.

( ) I will make my own housing arrangements.

\* The Homestay Application form will be sent upon admission to the college. A fee of \$100 (U.S.) is required to process the Homestay Application, and is non-refundable.

### Health Insurance Choice

All international F1 students are required to show proof of medical insurance upon arrival. The insurance must be valid in the U.S.A. and met minimum requirement, please refer our website.

( ) I will have my health insurance from my home country.

( ) I will purchase the health insurance plan through Olympic College.

## Statement of Financial Responsibility

Olympic College requires certification of adequate financial support from applicants. This statement and a current original bank statement MUST be on file with Olympic College before admission will be considered. The "original" letter with an official signature on "bank letter head" must verify a current balance with a minimum of \$16,239 (USD). A student must be prepared to pay tuition, medical insurance, and fees by the first day of each quarter or at the time of registration or as stated by college policies.

I,  (name of student) affirm that:

- I will have sufficient funds available to pay all necessary expenses in the amount indicated in the Tuition and Expenses section for duration of study. The source of these funds will continue until the end of my program. I will also be able to pay for travel to and from my home country.
- I understand that scholarships, grants or loans from Olympic College are limited for international students.
- The specified sources of funds and the amount in U.S. dollars to be paid are provided by:

Check one and write in the amount:

(  ) Family funds \$  (  ) U.S. sponsor \$   
(  ) Personal funds \$  (  ) Scholarship \*\*\$

\*\*Government or agency sponsoring student must attach a letter stating amounts and period of coverage.

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Name of person (parent) or company/agency paying

Relationship to student

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Contact information of person or company/agency paying

I hereby certify that the information I have provided is accurate and complete to the best of my knowledge and that I will have available the full amount reported above for my personal and academic expenses. I understand the tuition and expenses presented.

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Student signature

Date (month/date/year)

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Parent/legal guardian signature (if the student is under 18 years old.)

Date (month/date/year)

## Payment

I will pay with the following method:

- (  ) Check or money order enclosed  
(  ) Credit card (please fill out information below.)

Name as it appears on the card \_\_\_\_\_

Signature of cardholder: \_\_\_\_\_

Credit card number: \_\_\_\_\_

Exp. date: \_\_\_\_/\_\_\_\_ Three-digit security code on back of card: \_\_\_\_\_

- (  ) Wire transfer to Olympic College:

Beneficiary: Olympic College Name of Bank: US Bank

Account Number: 1 535 9514 5985 Routing Number: 125000105

SWIFT Code: USBKUS441MT