Chaffey College
International Student Office

Student Photo

5885 Haven Avenue • Rancho Cucamonga • CA • 91737
(909) 652-6195 • (909) 652-6194 (fax)

INTERNATIONAL STUDENT APPLICATION

➢This application is for ☐ Fall ☐ Spring ☐ Summer 20____

➢Legal Name_____
Last (Family) First Middle

➢Other Names Used_____
Last (Family) First Middle

➢Date of Birth_____ ➢Gender ☐ Male ☐ Female

➢Social Security #_____ ➢Native Language_____

➢Country of Birth_____ ➢Country of Citizenship_____

➢Current Mailing Address_____
Street Number Street Name Apt. #

_____
City State Zip

➢Home County Address (Parents name, Address and Phone #)

_____

_____

➢US Phone #_____ ➢Daytime/Message #_____

➢Fax #_____ ➢E-Mail Address_____

➢Major_____ ➢Major Code_____

➢Are you currently in the US? ☐ Yes ☐ No ➢Passport expiration date_____

➢If Yes, what is your current status? ☐ F-1 ☐ F-2 ☐ B-1/B-2 ☐ J-1 ☐ Other_____

➢If F-1, what institution issued your I-20_____

➢What institution are you now attending?_____

➢If B-1/B-2 (tourist), INS form I-94 #_____expiration date_____ date of entry_____

➢Do you plan to travel outside the US prior to the beginning of the semester? ☐ Yes ☐ No

➢If you are outside the US, please indicate the mailing address for I-20 form:_____

_____

I hereby certify that the information set forth in this application is true to the best of my knowledge. If accepted to Chaffey College, I hereby agree to abide by all the rules and regulations set forth by the College.

Student Signature_____ Date_____