

INTERNATIONAL STUDENT ADMISSION APPLICATION

Office of International Student Services | 900 College Circle, Mount Laurel, NJ 08054 rcbc.edu/international | international@rcbc.edu

Return completed application to:

Rowan College at Burlington County
Office of International Student Services
900 College Circle
Mount Laurel, NJ 08054

APPLICATION DEADLINES

Starting Semester	F-1 Applicants Applying from Overseas	F-1 Applicants Transferring from a U.S. Institution
Fall	June 30	August 1
Spring	October 30	December 15

^{*}Transfer students - complete application then contact office for transfer eligibility form.



INTERNATIONAL STUDENT APPLICATION CHECKLIST

Stu	dent Name	
	LAST NAME	FIRST NAME
	This checklist MUST be submitted with ALL the following document	nts.
		OFFICE USE ONL
	Rowan College at Burlington County International Student Application Address in home country (required for form I-20) Valid current email address for status of application Indication as to which degree you will pursue (cannot be ESL)	
	\$100.00 non-refundable application fee (check/money order <i>only</i> – no cash)	
	Tuition and Expenses form (signed and dated)	
	Photocopy of passport (if currently in the U.S. – copy of visa and 1-94 arrival record)	
	Current and previous l-20s (if transfer student) or DS 2019 (if J-1 visa holder)	
<u> </u>	Official high school diploma (translated into English and evaluated by NACES) *Please use only evaluation companies approved by NACES for evaluation services.* Visit naces.org/members	
	Responsibilities of an International Student (signed and dated)	
	Official TOEFL or IELTS test score report (if applicable)	
	Sponsor's Affidavit and Evidence of Annual Cash Support (signed and notarized) Proof of income (income tax returns within the last year or pay stubs for last six month Bank statements within past 3 months	ns)
	Sponsor's Affidavit and Promise of Free Room and Board (signed and notarized) Proof of income (income tax returns, pay stubs for last six months) Bank statements within past 3 months Copy of deed or lease & current rent receipts	
	RCBC Certificate of Immunization (required by the State of New Iersey)	



INTERNATIONAL STUDENT ADMISSION APPLICATION

Office of International Student Services | 900 College Circle, Mount Laurel, NJ 08054 rcbc.edu/international | international@rcbc.edu

Desired Start Date (Cl	hoose One): Fall 20	Spring 20		
Title: \square Mr. \square Mrs. \square Ms.	Date of Birth:	MONTH	/	/
Applicant's Name:				
FAMILY NAME	FIRST NAME			MIDDLE NAME
U.S. Address:	STREET			APARTMENT#
Nonzak				
CITY		STATE		ZIP CODE
Telephone:				
Email Address:				
Address in Home Country (required for I-20):				
Country of Birth City of Birth	Country of Citizenship	p		
Are you currently studying in the U.S. now?	Yes □ No If yes, where?			
Do you currently have a valid visa?	No If yes, which visa type?			
What major will you study here? (see listing on pg.	7) Program:			
What is your native language?				
What is the highest level of education you have co	ompleted?			
When did you complete it?				
Where?				
Did you bring dependents to the U.S.? Yes				



Date of Birth

First Name

Family Name

INTERNATIONAL STUDENT ADMISSION APPLICATION

For dependent information – please complete the following information: Country of Birth

City of Birth

Country

of Citizenship

Relationship

What is your primary g ☐ To complete an R ☐ To complete an as What influenced you to ☐ College advertises	CBC degree and to sociate degree apply to Rowan (ransfer to College a	another college	unty?		
☐ College web page		Ор	en house			
Where would you like y	rour I-20 sent? (pr	int addre	ess and contact na	me CLEARLY):		
Voluntary Information (The following information is		e for federal	reporting and does n	ot affect your admissio	on or placement.)	
Gender	☐ Female	☐ Mal	le			
Race/Ethnic Group	☐ Alaskan Na☐ American Iı☐ Asian/Pacif☐ Hispanic☐ White (not	tive ndian ica Island of Hispa				
I hereby certify that the submission of false infor the student code of cond United States Citizenshi	mation may result luct at Rowan Col	in dismis lege at Bı	ssal from the coll urlington County	ege and/or termin	nation of my I-20.	. I will abide by
Student Signature						
Date (Month/Day/Year)					



UNDERSTANDING MY RESPONSIBILITIES AS A NONIMMIGRANT F-1 VISA/STATUS STUDENT

As an international student at Rowan College at Burlington County, I understand and agree to adhere to the following United States Citizenship and Immigration Service (USCIS) rules regarding maintaining my student visa status. Failure to comply with USCIS rules and regulations may result in my becoming "out of status" and result in possible USCIS action against me. By signing this form, I acknowledge that I accept and understand the requirements and responsibility of a lawful F-1 visa holder. Additionally, Rowan College at Burlington County has specific rules that help students comply with these guidelines. ("I" or "me" or "my" refers to the student who is signing this document.)

- While the Office of International Student Services of Rowan College at Burlington County provides students with a superior level of advisement and other student services that pertain to students in F-1 status, we do not provide legal services. For legal issues and services, you should refer to a qualified immigration attorney. Likewise, we are not parents. Students need to act responsibly and maturely, both in and out of the classroom.
- The Office of International Student Services is required to report my compliance with USCIS rules and regulations. I further understand that I am responsible for knowing and adhering to these rules and that there may be serious consequences to me should I fail to comply with these rules.
- It is my responsibility to monitor my own registration status and make sure that my courses have not been dropped for non-payment, or, if a class has been canceled, it is my responsibility to make sure that I find another class to replace the canceled one and maintain my full-time status.
- As an F-1 student, I am responsible for completing no fewer than twelve (12) credits in the fall and spring semesters of each academic year. I must satisfy attendance requirements of each course and make reasonable academic progress toward a degree. If I fail to do this—for whatever reason—I understand that I may become "out of status" and will need to apply to the USCIS for reinstatement..
- I understand that attendance is critical for successful completion of college courses. It is my responsibility to notify the Office of International Student Services if I am unable to satisfy attendance requirements. Students who have emergencies or medical conditions that happen unexpectedly and keep a student from attending classes must be able to document these problems as soon as it is reasonable after they occur. We cannot help any student who does not report emergencies after a week of any given event.
- I understand that I will be tested for mathematics and English language proficiency and, if the test results indicate, I may have to take ESL or developmental classes prior to, or concurrent with, courses that are required for my major.
- I will seek and accept initial placement and advising from the Rowan College at Burlington County advisement staff.
- I will notify the Office of International Student Services of any change of address within 10 days in the event that I change my address in the United States. If I fail to do this, I may become out of status and require reinstatement.
- I am solely responsible for making sure that my immigration documents are current and in order—including the expiration date on my I-20—and for providing the Office of International Student Services with copies of any changes, such as a new I-94 card and updated visa. I am solely responsible for the timely submission of all my documents to the USCIS.
- I am responsible for communicating with the Office of International Student Services staff before I stop taking courses or leave Rowan College at Burlington County or take a break in my studies from RCBC, for any reason (examples: transfer to another school, change of status, health issues, marriage, returning home, etc.).
- I must consult the Office of International Student Services at least two weeks prior to any travel outside of the United States. Students who have changed their status in the U.S. or who wish to travel outside the U.S. on expired visas do so at great risk. Therefore, it is necessary to seek the advice of this office prior to any travel outside of the United States.



UNDERSTANDING MY RESPONSIBILITIES, continued

A Rowan College at Burlington County SEVIS Designated School Official (DSO) will need to sign page two of my I-20 prior to travel outside of the United States.

- I will not take any vacation time or break in my studies during any academic term without the approval of the Office of International Student Services. Likewise, I agree not to leave the United States or begin my vacation before the official (last day) of the semester.
- I understand that my reason for being in the United States is to be a student, and that I may have to attend school at times that I don't find convenient. Depending on course availability, I may have to come to school five days per week.
- I understand that all documents submitted to Rowan College at Burlington County become the property of Rowan College at Burlington County and cannot be returned. Please submit only the required documents listed on the document checklist of the application. All other documents are not considered for the admission process and cannot be returned.
- If I transferred my I-20 from another school to Rowan College at Burlington County, it is my responsibility to make sure that I am in possession of my Rowan College at Burlington County I-20 before classes begin. It is my responsibility to provide official transcripts from other U.S. colleges/universities.
- If applicable, it is my responsibility to have my foreign transcript evaluated by a NACES recognized evaluator of foreign credentials. I am responsible for submitting this evaluation to Rowan College at Burlington County.
- I understand that I cannot study at another school while my SEVIS record (I-20) resides with Rowan College at Burlington County without the specific authorization of the Office of International Student Services.

Student's Printed Name	Student's Signature	
RCBC Student ID#	Date	

Persons who intend to change their status to any other immigrant or nonimmigrant category are advised to seek the help of a qualified immigration attorney. Students who have pending petitions for permanent residency in the United States MUST make this known to the Office of International Student Services at Rowan College at Burlington County.

Social Security Cards: As of October 13, 2004, international students can NOT be issued a Social Security card without the offer of lawful employment. Since new students can only work on campus, and since jobs are scarce, a limited number of students can qualify for a Social Security Card.

International students do NOT need a Social Security number to get a driver's license, to open bank accounts or to rent apartments.



PROGRAMS OF STUDY

ART AND DESIGN

Art

Culinary Technology

Entertainment Technologies

Fashion Design

Graphic Design and Digital Media

Music

Photography

Theater

BUSINESS

Accounting

Business Administration

Business Management Technology

Fashion Product Merchandising

Hospitality and Tourism Management

COMMUNICATION AND HUMANITIES

American Sign Language/Deaf Studies

Communication Arts

English

History

Philosophy

EDUCATION

Education

ENGINEERING AND TECHNOLOGY

Chemical Engineering

Construction Management

Electrical Engineering Technology

Engineering

Mechanical Engineering Technology

Applied Technology Management

HEALTH SCIENCES

Dental Hygiene

Diagnostic Medical Sonography

Exercise Science Health and Wellness Promotion

Health Science(s)

Nursing

Radiography

INFORMATION TECHNOLOGY

Computer Information Systems

Computer Science

Cybersecurity

Computer Engineering Technology

LAW AND PUBLIC SERVICE

Criminal Justice

Political Science

SCIENCE AND MATHEMATICS

Biology

Chemistry

Environmental Science

Mathematics

Physics

SOCIAL AND BEHAVIORAL SCIENCE

Human Services

Psychology

Sociology

IMPORTANT: All applicants interested in the Health Sciences programs will be admitted as a degree-seeking student in Health Science until officially accepted by the program. This includes Nursing, Radiography, Dental Hygiene and Diagnostic Medical Technology.



FUNDING SOURCES

YOUR FUNDING CAN COME FROM ANY COMBINATION OF SOURCES IN THE U.S. OR ABROAD:

1. FUNDS FROM "SPONSORS" (parents, relatives, friends, organizations) -You may have as many sponsors as you need. Sponsors may provide you with support in the form of money and/or room and board. Free room and board is when you live with someone and don't have to pay for your room or food.

It is highly recommended that at least part of your financial support come from your home country.

A sponsor should promise only as much money as he or she is capable of giving you. A sponsor should promise only what he or she intends to give and only as much as can be afforded.

2. **PERSONAL FUNDS** come from your own resources, not those of anyone else. Unless you have enough money to support yourself for your entire program of study, or can prove other sources of personal income, you will need a sponsor.

EVIDENCE REQUIREMENTS

COMPLETE THE APPLICATION AND SUBMIT IT WITH ALL THE REQUIRED EVIDENCE OF FUNDING DIRECTLY TO THE OFFICE OF INTERNATIONAL STUDENT SERVICES ELECTRONICALLY, OR VIA FAX OR MAIL. (DO NOT MAIL US ORIGINALS; KEEP THEM FOR YOUR INTERVIEW.)

ALL DOCUMENTS YOU SUBMIT MUST BE:

- a. Less than two months old.
- b. In English. (We cannot review documents that are not in English or US currency.)

EVIDENCE REQUIRED:

SPONSORS OF CASH SUPPORT

a. SPONSOR'S AFFIDAVIT AND PROOF OF ANNUAL CASH SUPPORT

This form may be copied for each sponsor. All questions must be answered.

b. PROOF OF INCOME

Individual sponsor

Any of the following with most recent pay stub:

Income tax returns or receipts

Pay stubs for last six months

Bank/investment statements for the last six months

Company Sponsor

Business registration, licenses and profit and loss statement

- 3. BANK STATEMENT in the name of the sponsor only. A monthly statement of balances and deposits.
 - Letters from bank officials will not be accepted.
 - WARNING

If there is no proof of income provided with a bank statement, the statement balance will be totaled and divided by the number of years in your program of study to determine the amount available to you for each year.



FUNDING SOURCES, continued

WARNING

The income of a company is not the personal income of the owner of the business and will not be accepted as proof of income. The owner/sponsor must still provide proof of personal income.

WARNING

If a bank statement is in the name of more than one person, each individual must submit an affidavit of support.

WARNING

We cannot accept bank statements that do not specify monthly balances and deposits.

SPONSORS OF FREE ROOM AND BOARD:

a. SPONSOR'S AFFIDAVIT AND PROOF OF FREE ROOM AND BOARD

b. PROOF OF INCOME: Any of the following with most recent pay stub:

Income tax returns or receipts;

Pay stubs for last six months;

Bank/investment statements for the last six months

c. COPY OF PROPERTY LEASE, DEED, RENT RECEIPTS OR UTILITY BILL

• WARNING

If you are presently in the U.S., you must be living with the sponsor at the time of filing this application for this to be counted towards your means of support.

PERSONAL FUNDS:

BANK/ASSET STATEMENT in your name: monthly statement of balances and deposits for the last six months.



ANNUAL COSTS FOR INTERNATIONAL STUDENTS TUITION AND EXPENSES

Estimated cost per year based on 12 credits per semester

Tuition and Fees:	\$7,332.00
Living Expenses:	
Books, Transportation, Supplies and Misc:	\$3,668.00
Total	\$21,000.00
(Expenses for dependents: \$5,000.00 extra for	r each dependent)
How will you be funded for every year of your program of study? Please check off your funding below and indicate how much will be provide	d or available to you every year:
Source(s) of my support	Annual Amount
Personal Funds: The amount available to me from my own resources every year is (divide by number of years in your program)	\$
Cash Funds from a Sponsor: to be given to me every year	\$
Sponsor's name:	
Cash Funds from a Sponsor: to be given to me every year	\$
Sponsor's name:	
Free Room and Board from a Sponsor: with whom I will live	\$
Sponsor's name:	
Total amount available to me every year of study. This amount must be the same or more than	\$
the minimum annual costs.	
Student's Signature Date	



SPONSOR'S AFFIDAVIT AND EVIDENCE OF ANNUAL CASH SUPPORT

What does this affidavit mean?

By completing this affidavit, you are swearing to the U.S. government that you will provide this student with a specific amount of money, from your own financial resources, for every year he or she is going to study at Rowan College at Burlington County and live in the U.S. You are also proving that you can afford the support you are promising with the documentary evidence you have attached.

Before signing it, it is important to understand that you are making a financial commitment to the student that should not be broken. Sponsors who fail to provide the promised support, force students to drop out of school and cause pain and suffering. Do not expect that the student will be able to help support the costs through employment. Employment is strictly controlled by the Department of Homeland Security and very limited.

How a sponsor should complete this form:

- 1. Fill this form out in English (or have it officially translated). *Promise only the amount of money you are able to give.* The most common reason we reject affidavits is that we do not believe a sponsor can afford to give as much as promised.
- 2. Sign and date the affidavit.
- 3. Attach the supporting evidence listed below. The affidavit will not be accepted without the required supporting evidence.
- 4. Give the student the original documents, and have him or her submit them electronically or make photocopies to mail to us with the student's application. The student will need to keep the originals to present to the consul at the visa interview.

Supporting evidence required:

1. Proof of income (any of the following) with most recent pay stub:

Income tax returns or receipts, or Pay stub for last six months, and bank/investment statements for the last six months

2. Bank/investment statements for the last six months in YOUR name only.



SPONSOR'S AFFIDAVIT OF ANNUAL CASH SUPPORT FOR AN F-1 INTERNATIONAL STUDENT

I,	, pro	mise that I can and will give
Sponsor's Name	, 1	0
	no less than U.S	5. \$
Student's Name		
in cash for EVERY YEAR of the student's program at	Rowan College at Burlington County.	
My relationship to the student is:		
Address:	Parent, spouse, brother/sister, friend	
Email:		
Name of my employer:		
Title/Position:	Annual income:	
A	ffirmation of Oath	
I hereby affirm or swear that the contents of the swill provide at least USD \$21,000 per year to meet educational needs include the cost of tuition, fees, book including any inflationary costs. Furthermore, I understant that by law the international student I am sponsoring can to receive financial aid after arrival.	the educational needs of the above na s and living expenses for the duration of ad that I am responsible for all debt incurre	amed student. I understand that the student's academic program - ed by the student. I also understand
Signature of Sponsor	Date	
To be completed by Notary Public or Legal Official:	Signature of Notary or Legal Officer	Seal/Stamp



SPONSOR'S AFFIDAVIT AND PROOF OF FREE ROOM AND BOARD

What does this affidavit mean?

By completing this affidavit, you are swearing to the U.S. government that this student will live with you free of any charge for room and food for every year he or she is attending Rowan College at Burlington County. (The student cannot be required to provide you with any services such as, babysitting, cleaning, etc. in exchange for the room and board, as that is employment.) You are also proving that you are the person who owns or rents the property and can afford the support you are promising with the documents you have attached.

Before signing it, it is important to understand that you are making a financial commitment to the student that should not be broken. Sponsors who fail to provide the promised support force students to drop out of school and cause pain and suffering. Do not expect that the student will be able to help support the costs through employment. Employment is strictly controlled by the Department of Homeland Security and very limited.

How the sponsor should complete this form:

- 1. Fill this form out in English (or have it officially translated).
- 2. Sign and date the affidavit.
- 3. Attach the supporting evidence listed below. The affidavit will not be accepted without the required supporting evidence.
- 4. Give the student the original documents and have him or her submit them electronically or make photocopies to mail or fax to us with the student's application. The student will need to keep the originals to present to the consul at the visa interview.

Supporting evidence required:

- 1. Proof of income (any of the following) with most recent pay stub:
 - Income tax returns or receipts, or Pay stub for last six months, and bank/investment statements for the last six months in YOUR name only
- 2. **Copy of your deed, lease, current rent or receipts of current utility bill** to prove that you are the person who owns or rents the property.



SPONSOR'S SWORN PROMISE OF FREE ROOM AND BOARD

I,Sponsor's Name	, promise that i	for each year of his/her study		
Rowan College at Burlington County, Student's Name				
will live free of charge with me in my home at:				
Street Address:				
City:	State:	Zip:		
Telephone:				
Email:				
☐ I own this property.				
☐ I rent this property.				
If the student is presently in the U.S., does he/she current	ly live with you? 📮 Yes 📮 No			
My relationship to the student is	Parent, spouse, brother/sister, friend	H		
Af	ffirmation of Oath			
I hereby affirm or swear that the contents of the statem provide free room and board for the above named stud with any services, such as babysitting, cleaning, etc. in exc	ent. I understand that by law the student	cannot be required to provide me		
Signature of Sponsor	Date			
To be completed by Notary Public or Legal Official:	Signature of Notary or Legal Officer	Seal/Stamp		
Sworn and subscribed to before me on this date:				

CERTIFICATE OF IMMUNIZATION

PLEASE RETURN THIS FORM TO:

Rowan College at Burlington County



Office of Outreach and Admissions 900 College Circle Mount Laurel, NJ 08054-9416 admissions@rcbc.edu (Must be sent from your RCBC email address)

STUDENT INFORMATION						
RCBC ID#			Date of Birt	_ Date of Birth		
Name						
NameLAST		FIRST		MIDDLE	3	
Address						
City			State		_ Zip	
IMMUNIZATION INFORMATION (S	See attached for sp	pecific immuniza	tion requirement	ts.)		
VACCINATION REQUIRED					LABORATORY SEROLOGY (Blood/Titer Test)*	
	1ST DOSE DATE	2ND DOSE DATE	3RD DOSE DATE		DATE	
MMR			X			
Measles			X	OR		
Mumps		X	X	OK		
Rubella		Х	X			
Hepatitis B						
Men B (Meningococcal Disease)		Х	X			
MenACWY (Meningococcal Disease)			X			
*Laboratory Serology (blood/titer test) res	sults must be att	ached.				
CERTIFICATE OF HEALTHCARE PH	ROVIDER					
☐ Student compliant with regulations			☐ Student	not complia	ant with regulations	
Physician's Name		Pl	nysician's Signat	ure		
Physician's License #			D	ate		
EXEMPTIONS						
<i>MEDICAL</i> ☐ This student is exempt from the above i	mmunizations o	n the grounds of	f medical contra	indication. (A	Documentation from physician attached)	
OTHER ☐ I am exempt for religious reasons. (Wri. ☐ I am exempt from the MMR immunizat						
Student Signature					_ Date	

IMMUNIZATION REQUIREMENTS



The State of New Jersey requires that all full-time (12 or more credits), degree seeking students, provide proof of all required immunizations certified by a health official.

Students must submit official transcripts to the Office of Outreach and Admissions 900 College Circle Mount Laurel, NJ 08054

admissions@rcbc.edu
(<u>Must</u> be sent from your RCBC email address)

VACCINE	REQUIREMENT	REQUIRED FOR
Measles	Two doses of live measles vaccine. (combined Measles, Mumps, Rubella "MMR" meets this requirement), with the first dose at 12 months of age or after and second dose no less than one month after the first dose OR Laboratory/serologic evidence of immunity.	Students born 1957 or later
Mumps	One dose of live mumps vaccine at 12 months of age or after (MMR meets this requirement) OR Laboratory/serologic evidence of immunity.	Students born 1957 or later
Rubella	One dose of live rubella vaccine at 12 months or after (MMR meets this requirement) OR Laboratory/serologic evidence of immunity.	Students born 1957 or later
Hepatitis B	Three doses of hepatitis b series, or alternatively, any two doses of a hepatitis b vaccine licensed and approved for a two dose regimen, administered to the student between 11 through 15 years of age OR Laboratory/serologic evidence of immunity prior to infection.	All students
Meningococcal	As of June 15, 2020, New Jersey State law now requires that all full-time, degree-seeking students enrolling at a community college of higher education in this state shall be vaccinated for Meningitis (Two [2] doses). This includes students born prior to 1957.	All students