

INTERNATIONAL STUDENT APPLICATION for INTENSIVE ENGLISH PROGRAM

Date				
Section I (Student Information)				
Name as Appears on Passport: Last, (Family Name)		First,		
[m			T -	
Mailing Address:			Country:	
				
			Postal Code:	
			-	
Home Phone:			Email Address:	
Cell Phone:				
STUDY PLANS:				
Anticipated Date of Entry: Fall Semester				
Fall Semester				
Spring Semester				
REQUIRED INFORMATION:				
Birth Date: (MM/DD/YYYY)		Age:		
Citizenship:		Country of Birth:		
Marital Status:		Male:	Female:	

Print Name:	Page 2		
Section II (Guarantor's Agreement)			
I guarantee that funds will be available to pay student. My annual income is \$ U. S. and I have att (No copies) Signature: Date:			
Section III (Medical Consent)			
In case of serious illness or accident, I give Mississippi College or its repres transportation to a doctor or hospital of their choice, injections, examinat health. I agree to pay all off-campus medical costs. In the event of a condi-	ions, medication and surgery that is considered necessary for my good		
Student's Signature:Date:			
Parent's or Guardian's Signature (if student is under 18)Date:			
I understand that I must agree to attend at least 2 long semesters of the Ir I understand that I must purchase health insurance in the U. S. through M			
Mississippi College has permission to communicate at any time with my parelated to my health.	arents and or sponsor concerning my academic performance and issues		
Section IV (Student Agreement)			
In order to apply for admission, I agree to submit -Completed International Undergraduate Student Application (4 sections) -A current bank statement from my parents or sponsor -My high school transcripts showing graduation date -My high school diploma			
Have you ever been arrested/convicted for anything other than a minor traffic violation?	Nature of Offense:		
Yes: No:	Date:		
If admitted to Mississippi College, I agree to abide by the policies and proof other official publications authorized and approved by the College. I affirm that the information given in this application is accurate and compinstitution and does not permit possession of or use of alcohol or drugs who standards of Mississippi College and the established residence hall policies and state your full name:	olete to the best of my knowledge. Mississippi College is a Baptist nile enrolled. I agree to conduct myself in accordance with the high		
Signature: E	Date:		
Please mail the completed application and fee (\$25) to:	Office of Global Education at Mississippi College		

201 Monroe Street Clinton, MS 39056 Phone: 601.925.3986

For application information: Email. vandersteen@mc.edu

Mississippi College considers qualified applications without regard to race, sex, creed, national origin, age or handicap in its admission policies and practices.