



International Education Programs
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INTERNATIONAL EDUCATION ADMISSIONS FORM

Please tell us how you learned of Clover Park Technical College:

- A friend or agent Advertisement Internet
 Education Fair CPTC Student, Instructor or Staff
 Other _____

TYPE OR PRINT USING BLOCK LETTERS

FAMILY NAME AS PRINTED ON PASSPORT _____	FIRST NAME _____	MIDDLE _____	PREVIOUS LAST NAME _____
<input type="checkbox"/> FEMALE <input type="checkbox"/> MALE DATE OF BIRTH _____ <small>MM/DD/YYYY</small>	MOTHER'S NAME _____	FATHER'S NAME _____	
COUNTRY OF BIRTH: _____ CITIZENSHIP: _____ NATIVE LANGUAGE: _____	WHAT QUARTER DO YOU PLAN TO BEGIN? <input type="checkbox"/> SUMMER / JUNE <input type="checkbox"/> FALL / SEPTEMBER <input type="checkbox"/> WINTER / JANUARY <input type="checkbox"/> SPRING / MARCH-APRIL	PROGRAM YOU WISH TO ENTER AT CPTC: _____ 2 ND OPTION _____ DO YOU PLAN TO TRANSFER TO A FOUR-YEAR COLLEGE OR UNIVERSITY AFTER ATTENDING CPTC? <input type="checkbox"/> YES <input type="checkbox"/> NO	
IF CURRENTLY IN THE U.S., WHAT IS YOUR VISA CLASSIFICATION: <input type="checkbox"/> F-1 <input type="checkbox"/> M-1 <input type="checkbox"/> OTHER _____ VISA # _____ <small>PASSPORT WITH I-94 REQUIRED</small> EXPIRATION DATE: _____	EDUCATION: NAME OF HIGH SCHOOL: _____ COUNTRY: _____ DATES ATTENDED: _____ GRADUATED? <input type="checkbox"/> YES <input type="checkbox"/> NO	EDUCATION: MOST RECENT COLLEGE/UNIVERSITY: _____ COUNTRY: _____ DATES ATTENDED: _____ GRADUATED? <input type="checkbox"/> YES <input type="checkbox"/> NO	
PERMANENT ADDRESS IN HOME COUNTRY STREET _____ PROVINCE //CITY //COUNTY _____ COUNTRY _____ PERMANENT EMAIL: _____ PERMANENT PHONE: _____			
YOUR ADDRESS IN U.S. STREET _____ APT# _____ CITY _____ STATE _____ ZIP CODE _____ YOUR EMAIL: _____ PHONE: _____			
EMERGENCY CONTACTS: NAME: _____ PHONE: _____ EMAIL: _____ RELATIONSHIP: _____			
IMPORTANT INFORMATION; 1. All students are required to pay all tuition and fees before the start of class. Financial aid is not available for international students. 2. International students must be covered by health and accident insurance. Verification of insurance is required. Clover Park Technical College is not liable for failure to comply with this requirement. 3. International students must provide the International Education Office with a current address and telephone number. 4. International students must maintain satisfactory progress at all times or face possible probation or withdrawal from the college. 5. International students must maintain current VISA status and comply with all regulations regarding their VISA status or face possible withdrawal from the college.			
I UNDERSTAND THE ABOVE REQUIREMENTS AND DECLARE THAT THE INFORMATION I HAVE PROVIDED ON THIS FORM IS TRUE AND CORRECT, TO THE BEST OF MY KNOWLEDGE.			
_____ <small>NAME – PRINT IN BLOCK LETTERS</small>	_____ <small>SIGNATURE</small>	_____ <small>DATE</small>	