INTERNATIONAL STUDENT APPLICATION FOR ADMISSIONS

THIS SCHOOL IS AUTHORIZED UNDER FEDERAL LAW TO ENROLL NON-IMMIGRANT ALIEN STUDENTS.

The procedure obtaining an M-1/F-1 Student Visa is begun by the prospective student making written application American National College.

This written application, including school transcripts or other records of courses taken, along with proof of financial responsibility, and other supporting documents, are reviewed and evaluated by American National College admissions committee.

When American National College determines that a prospective student’s qualification meets all standards for admissions, and if we then accept the applicant for enrollment in a full course of study, we issue the student a certificate of eligibility.

In order to issue I-20 Form, the student must first register at American National College and provide us with a completed Application Form, Registration Fee ($100), and proof of financial support.

(THE REGISTRATION FEE OF $100 IS NON REFUNDABLE)

This I-20 Form is then taken by the student to the American Consulate in the student’s home country with his/her supporting financial documents for use in supporting the M-1/F-1 Visa application.

Once your visa is approved to come to the United States as a student, your spouse or unmarried children may apply under the F2/M2 visa form.

Attached, please find additional information regarding the payment of fees, the application for admissions and forms for student and sponsor responsibilities that must accompany the application.

The foregoing information has been prepared by the School’s legal counsel and is derived from pertinent statutes 8 U.S.C. sec.1101, Authority Sections 101 (a) (15) (m) (i-ii-iii), and regulations 8 C.F.R. sec 214. 2-3.
INTERNATIONAL STUDENT APPLICATION FOR ADMISSIONS

This form provides information required to complete the I-20 form. Please fill out the form completely, and submit it along with all supporting documentation and the $100 non-refundable registration fee to American National College to avoid any delay in processing.

Name: ___________________________________________________________________________

(Family) (Given) (Middle)

Date of Birth: ________________ Country of Birth: __________________________

MM / DD / YYYY

_____Female ___Male

Country of Citizenship: ______________ Native Language: __________________________

Permanent Mailing Address:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Telephone: __________________ Email: _____________________________________

Please select one course name and start date from our current Course Schedule.

Course Name:

_____Cosmetology Operator Course – 1500 Hours

_____Manicurist - 600 Hours

_____Esthetician – 750 Hours

_____Instructor – 750 Hours

_____English as a Second Language – 1000 Hours

_____Pharmacy Technician – 52 credits

_____Surgical Technologist – 69 credits

_____Medical Recorders Coder & Claims Technician- 46 credits

_____Paralegal – 72 credits

_____Medical Transcriptionist – 81 credits

_____Administrative Assistant – 60 credits

_____Medical Assistant – 61 credits

_____Business Office Specialist – 33 credits

_____Computer Network Technician – 73 credits

_____AAS in Business Administration ---60 credits

_____AAS in Computer Science ---60 credits

_____AAS in in Healthcare Administration---60 credits

Course Start Dates: 2014

_____Jan _____Feb _____March _____April _____May _____June _____July

_____Aug _____Sept _____Oct _____Nov _____Dec

How was your registration fee paid? (Select one):

_____Enclosed Check _____Wire Transfer (Receipt Enclosed)
What is your present knowledge of English?

Reading  ___ Excellent ___ Good ___ Poor  
Writing   ___ Excellent ___ Good ___ Poor  
Listening ___ Excellent ___ Good ___ Poor  
Speaking ___ Excellent ___ Good ___ Poor  

Please note: All classes at American National College are conducted in English.

All applicants who will enter U.S. on a student visa must complete the following questions about financial support.

Source of financial support (SELECT ONE):

_____ Self _____ Parent _____ Family Member _____ Friend  

Current Account Balance:

________________________________________________________________________

Name and Address of Bank:

________________________________________________________________________
________________________________________________________________________

For efficient processing, original bank statements should accompany this application and MUST include a current date, account balance and show funds in U.S. Dollars.

If financial support is not coming from the student, the following statement must be completed by the student’s financial sponsor:

I (Financial Sponsor) ____________________________________________, certify that I will assume full financial responsibility (including educational expenses and living expenses) for (Student) _______________________________ while he/she is enrolled at American National College.

The applicant is my ____________________________________________
(state student’s relationship to applicant)

Signature of sponsor ____________________________________________

Date ______________________
Emergency contact person (Preferably in the US):

Name __________________________ Relationship ___________________

Address ____________________________

Telephone _______________________

References: Please list two references
1. _________________________________________________________________
   Name
   Address Phone

2. __________________________________________________________________
   Name
   Address Phone

Work History:
Current Company Name Address

Supervisor Company Telephone

How long employed? Position Held

Education:
All students enrolled at American National College must be at least 17 years of age and have proof of a high school diploma or its equivalent. Proof of your diploma should accompany this application. If you cannot provide documentation you will be required to take a basic skills test prior to the start of your program.
American National College

A Tradition of Educating For Success

Since 1986

_____________________________________________________________________________

Did you attend high school? ______ yes ______ no

Name ____________________________________ Graduation Date: ______________

City ________________________ State _________________ Country ______________

Did you attend a college or university? _____yes ____ no

Name ____________________________________________________________

City _________________________ State _______________ Country ______________

Major/ Field of Study:

_______________________________________________________________

Date Studies Completed:

_______________________________________________________________

Have you ever attended any of the following? College/University or Vocational/ Trade School
__yes ___ no

Name/Location:___________________________________________________________

________________________________________________________________________

What are your career goals:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I certify that the information on this application is true and correct.

Student Printed Name ____________________________________________________

Student Signature: ________________________________________________________

Date _______________________________
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Tuition and Registration Fee Payment Options

If a foreign student desires to open a bank account for the purpose of paying his/her tuition he/she must do so 20 working days prior to the first day of class. This must be done to guarantee that funds from the student’s new bank account will have cleared and are available one (1) business day prior to the first day.

If student plans to bring travelers checks to America to make tuition and other expenses payment, the student must clear travelers checks eight (8) days prior to the first day of class so that the funds will be available in U.S. currency one (1) business day prior to the first day of class.

Procedures for Wire Transfer
If you are interested in paying via wire transfer, please call the school at 770-454-2085 or send an email to International@amnc.edu for pertinent information.

* As of September 1st, ICE (US Immigration and Customs Enforcement) and SEVIS (Student and Exchange Visitor Information System) require a fee of $200.00 (SEVIS Form I-901 fee) for processing the M-1/F-1 student visa. You can pay at this address: https://www.fmjfee.com/index.jhtml. This payment will have to be made before you attend your interview with the US Consulate. See, https://www.fmjfee.com/i901fee/students/student/help.htm
AFFIDAVIT OF FINANCIAL SUPPORT (For Use Only by Sponsors from OUTSIDE the United States)*

PRINT: NAME OF SPONSOR

COMPLETE ADDRESS OF SPONSOR

agree to sponsor ____________________________ NAME OF STUDENT AND/OR STUDENT’S DEPENDENT

SPONSOR’S RELATIONSHIP TO STUDENT: ____________________________________________

We certify that I/we am/are able to support the student named above for a total period of ______ years (to support as long as needed enter “D/S”).

I/we will provide: (Please check and/or circle what you will support)

______ Living expenses (room, board, medical insurance, transportation, personal expenses, other)

______ School expenses (tuition, fees, books and supplies, other)

I/we understand that the estimated cost for ONE year of full time study ___varies per program selected from $8500 to $15,000.00___

All living and school expenses are estimated at $10,500.00 (USD) for the Current Academic Year and are subject to change.

In addition to the student named above, I/we also support:

_____ a spouse who is _____ completely ___ partially dependent upon me for support

_____ children ___(total #) who are completely___(#) or partially ___(#) dependent upon me for support

____________________________________________________(Signature MUST be notarized)

SIGNATURE OF SPONSOR

Date: Month___________________ day ____________________, 20_____

SIGNATURE AND SEAL OF AUTHORIZED NOTARY PUBLIC

The following evidence of ability to provide financial support must be submitted with this completed affidavit:

1. Sponsor Responsibility Document SIGNED BY THE SPONSOR. AND

2. An original letter from the sponsor’s bank (personal saving or checking accounts ONLY) that indicates the current available balance in United States Dollars. AND

3. An original letter from sponsor’s employer that verifies annual salary, or, if self-employed, the sponsor’s most recent income tax return.

NOTE: Additional documentation may be required as evidence of sponsor’s ability to provide financial support. For any dependent accompanying the student, please list the full name, birthdate, country of birth, and relationship to student on a separate paper along with a notarized statement indicating who will be providing the dependent’s financial support.

*U.S. citizens and permanent residents use USCIS form I-134, see International webpage for Instructions

AMNC (Atlanta)
5522 New Peachtree Road, Suite 114
Chamblee, GA 30341
Phone--770-454-2085

AMNC (HOUSTON -1960)
5020 Cypress Creek Pkwy, Suite A-12
Houston, TX 77069
Phone--281-580-2554

AMNC (HOUSTON-Pasadena)
1611 Spencer Hwy, Suite E
South Houston, TX 77587
Phone--713-946-5055
THIS FORM IS VALID FOR A VISA/STATUS APPLICATION FOR UP TO SIX MONTHS.
SPONSOR RESPONSIBILITY DOCUMENT

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY.

SIGN AND RETURN THIS DOCUMENT WITH THE AFFIDAVIT OF SUPPORT

Dear Sponsor:
Thank you for agreeing to sponsor student:___________________________. Please read this information carefully. It concerns your obligations as a sponsor of a student at American National College. You are taking on responsibility for a student who will be dependent on you for food, a place to live and study, and possibly transportation and personal expenses for the time s/he spends in the United States.
Please be aware of the following United States Customs and Immigration Service (USCIS) regulations:

• The student will be required to attend school full-time (a minimum of 18 hours per week).
• The student is not allowed to work.
• The student will be eligible for a Social Security card.

Health insurance is critical (very important). Medical care is extremely expensive in the United States and even a minor injury can cost thousands of dollars. If a student becomes ill or requires emergency treatment, health insurance can be a very important part of saving the student and the sponsor unnecessary expenses. $1800.00 per year for Health Insurance is included as part of the official American National College Estimated Living Expenses. That is the average of the medical plans we are aware of. Please research policies, some may be available from the student’s home country.

We hope that you will take this list of reminders seriously and plan to be a proud sponsor of an international graduate of American National College. Any changes in Sponsorship must be made in writing to the Campus Director’s Office and the student at least 30 days before the change becomes effective.

Personal information, grades, and financial documents will be kept confidential upon request and as required by law.
Please check the Affidavit form you have signed to be sure it shows exactly what expenses you intend to cover (living, educational, etc). Contact us if you are not sure how to complete the form.

This affidavit must be notarized and returned with the following information:

1. A bank letter including account opening date, and average and current balances.
2. Verification of income; a letter from your employer stating annual salary or taxes.
3. This information letter, signed and dated.

Thank you,
American National College

I have read and understand the above information and I agree with all the terms and obligations of the Affidavit of support

__________________________
Signature of sponsor

__________________________
Printed Name of Sponsor

__________________________
Date