



International Student Application

ATTACH RECENT PHOTO HERE

Date of Application: \_\_\_\_\_

NAME (in passport): \_\_\_\_\_
Last/Family Name First Name Middle Name

ADDRESS IN YOUR HOME COUNTRY

U.S. MAILING ADDRESS / CONTACT PERSON (IF ANY)

Street
Apartment #
City/State/Country/Postal Code
Telephone
Email Address (Please print clearly)

Name
Street Apartment #
City/State/Zip
Area Code / Telephone Cell Phone
Email Address (Please print clearly)

WHERE DO YOU WANT US TO SEND THE I-20 FORM? [ ] Home Country Address [ ] U.S. Address [ ] Will Pick Up

Date of Birth: \_\_\_\_\_ Gender: [ ] Male [ ] Female

Country of Citizenship: \_\_\_\_\_ City of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Are you currently in the USA? [ ] Yes [ ] No

If you are in the U.S., list type of VISA stamped in passport: \_\_\_\_\_ Passport Number: \_\_\_\_\_

VISA Issue Date: \_\_\_\_\_ (mm/dd/yyyy) VISA Expiration Date: \_\_\_\_\_ (mm/dd/yyyy)

Semester you plan to start: [ ] Fall \_\_\_\_\_ (year) [ ] Spring \_\_\_\_\_ (year) [ ] Summer \_\_\_\_\_ (year)

Program of Study: \_\_\_\_\_

Is English your first language? [ ] Yes [ ] No (If no, list first and second languages) \_\_\_\_\_

If English is not your first language, have you ever taken the TOEFL Test? [ ] Yes [ ] No

Have your score sent direct from ETS to: Trenholm State Community College, ATTN: Records, PO Box 10048, Montgomery, AL 36108 TSCC Institutional Code 1615

https://www.toeflgoanywhere.org/search-who-accepts-toefl#keywords=alabama&search\_by=location&perpage=50&pagenum=2&sort=function%20sort()%20{native%20code}%20

List high school you have attended / graduated:
Name of High School: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

List any Colleges and/or post high school institutions you have attended:
Name of College \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_
Name of College \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_
Highest Degree Earned: [ ] High school or equivalent [ ] Associate Degree [ ] Bachelor's Degree [ ] Master's Degree [ ] Doctorate

Are you transferring from a university in the United States? [ ] Yes [ ] No
Have you previously applied to Trenholm State Community College? [ ] Yes, When \_\_\_\_\_ (mm/dd/yyyy) [ ] No
How did you hear about Trenholm State? [ ] Webpage [ ] Online - other sites [ ] Family/Friend [ ] Other \_\_\_\_\_

I understand that withholding information requested in this application or giving false information may make me ineligible for admission to, or continuation in, the College. I agree to abide by the rules, policies, and regulations of the College as outlined in the Student Handbook and College Catalog. With this in mind, I certify that all above statements are correct and complete.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ (mm/dd/yyyy)

EDUCATIONAL RIGHTS AND PRIVACY ACT ("BUCKLEY AMENDMENT") NOTICE: Under the Federal Rights and Privacy Act 20 U.S.C. 12329 Trenholm State Community College may disclose certain student information as directory information. Directory information includes the names, addresses, telephone numbers, dates of birth and major fields of study of students, as well as information about students participation in officially recognized activities and sports, the weight and height: of members of athletic teams, the dates of attendance of students, degrees and awards received, and the most recent previous educational agency of institution attended by a respective student. If any student has an objection to the aforementioned information being released, the student should notify in writing records@trenholmstate.edu during the first three weeks of the respective semester or academic year.