International Exchange & Visiting Student Application

CHESTNUT HILL COLLEGE
Global Education Office

All global exchange and visiting students must be nominated by their home institution in order apply for admission to Chestnut Hill College (CHC). Incomplete applications will not be considered.

Application Deadlines: Spring semester: October 1 and Fall semester: April 1.

Instructions: The application packet is an Adobe Acrobat PDF. Students must type/ write clearly all fields, print the document, and scan back as a PDF to submit to Trachanda Garcia (garciat@chc.edu). Incomplete applications will not be processed.

1. **Application Form** – this form provides us with necessary information about you.
2. **Academic Planning Form** - this form assists us with creating your student class schedule. You should complete this with your academic advisor/professor/tutor. Please list prior classes taken at your home university.
3. **International Exchange Student Registration Form** – this form assists us with choosing your class/course schedule. You should complete this with your academic advisor/professor/tutor. Please select up to 10 classes/courses you would be interested in taking with the following items in mind:
    - Please refer to the course catalog with descriptions as this lists all the possible class/courses taught at CHC (http://my.chc.edu/ICS/Portal_Homepage.jnz?portlet=Schedule_of_Classes) – **this is not the final fall or spring course offerings.** The final course offerings are posted after the deadline.
    - Students will be registered for four (4) classes for a total of twelve (12) credits which is a typical workload for students studying in the United States. If you wish to enroll in fifteen (15) credits for a total of five (5) classes, please note this in your application.
    - Not all of your "1st choice" classes will be accommodated as they might not be taught over a year. Please select eight (8) classes within the correct level range.
4. **Financial Support Form –** this form indicates you have sufficient financial support to attend CHC.
5. **Residence Life Roommate Selection Form** - this form assists with selecting your room.
6. **Health Services Form –** this form is required and should be sent to the Health Office as instructed on the form. To obtain the Health Services form please visit their website: http://www.chc.edu/undergraduate/services/Health_Services/
7. **Copy of Passport –** Please attach a scanned copy of your passport photo page with biographical information (name, country, place of birth, etc.)
8. **Pre-Arrival Information –** this form should be submitted after receiving acceptance to CHC and no later than two (2) weeks prior to arriving to CHC.

Any questions and applications should be directed to Trachanda Garcia garciat@chc.edu regarding the international student exchange and visiting application.

INTERNATIONAL STUDENT EXCHANGE & VISITING APPLICATION

Name: Family/Surname _____

First _____ Middle Name (if none, use "X") _____

City of Birth: _____ Country of Birth: _____

Country of Citizenship: _____

Permanent Address - Home Country:

Address _____

City _____ State/Province _____

Postal Code_____Country Name _____

Home Phone # (with country code) _____

College/University E-Mail: _____Personal E-Mail:_____

Emergency Contact - Home Country:

Name _____ Relationship _____

City _____ State/Province _____

Postal Code_____Country Name _____

Home Phone # (with country code if known) _____

E-Mail:_____

I understand and certify that all information I have put into this application packet is accurate to the best of my knowledge. I also realize that by submitting my information after the deadline, I might not get priority with a housing assignment or class/course selection: (Please Print)

_____

Last or Family Name First Name

_____

Signature Date

Global Education Office (GEO) USE ONLY – Please do not write in this space

☐ Approved ☐ Denied _____ _____

Signature Date

Student Notified (time and date): _____

Comments:

INTERNATIONAL STUDENT EXCHANGE & VISITING ACADEMIC PLANNING FORM

NAME: _____ MAJOR OR INTENDED MAJOR: _____

FIELD OF STUDY: _____

I intend to do the following while at CHC (check all that apply):

- ☐ Take courses that will count toward degree requirements.
- ☐ Take courses related to my major for my personal interests.

In the space below, list the TITLES of courses in which you have enrolled <u>prior</u> to attendance at CHC. If more space is needed please feel free to use back of form or another sheet.

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____
11. _____
12. _____
13. _____
14. _____
15. _____

Highest Math Level Achieved (i.e. Basic Math, Algebra II, Trigonometry, Calculus, Linear Functions…)

_____

_____

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I am aware that course offerings at CHC fluctuate and that it may be necessary to adjust my courses accordingly. Also, I understand that my major department has final authority over what classes are to be taken at CHC to fulfill any requirements. I am also conscious that I may need to adjust my schedule once I arrive at CHC.

_____

Student's Signature (Month/Day/Year) Date

_____

Home Institution Advisor's Signature (Month/Day/Year) Date

INTERNATIONAL STUDENT EXCHANGE & VISITING REGISTRATION FORM

This form is to be used by international exchange and visiting students representing partner universities with which CHC maintains formal exchange ties. **Non-exchange or visiting students** interested in seeking a baccalaureate or graduate degree at CHC must submit a formal application to the Office of Admissions.

Application deadlines can be found on the Global Education website under exchange students. Return this form with the rest of your global exchange application.

PLEASE COMPLETE ALL INFORMATION:

Plan to study for the semester (insert year): FALL 20_____ OR SPRING 20_____ OR ACADEMIC YEAR 20_____to 20_____

Personal Information		
Name	Family_____First_____Middle_____	
Home College/University		
Major Study		
Home Address	Street_____ City_____ State/Providence_____ Postal Code_____ Country_____	
Country of Birth		
Country of Citizenship		**High School Graduation Date:** **High School Name:**
Home Phone	(include country code) -	
Cell/Mobile Phone	(include country code) -	
Gender	Male _____ Female _____	
Married/Single (optional)		**Birthday:** (Month/Day/Year)
Personal E-mail Address		

United States Department of Education Questions	
What is your ethnicity?	☐ Hispanic or Latino ☐ Not Hispanic or Latino
What is your race? Mark one or more races to indicate what you consider yourself to be.	☐ White ☐ Black or African American ☐ Asian ☐ American Indian or Alaska Native ☐ Native Hawaiian or Other Pacific Islander

Course Choices

If you need help in selecting appropriate courses and alternates, contact your home institution International Office or the Global Education Office at Chestnut Hill College. All courses must be selected from our CHC Tentative List of Fall or Spring classes. It is important that you make 1st and 2nd choices. **Exchange students are required to take a minimum of 12 credit hours of courses per semester to retain full-time status; generally four courses valued at 3 credit hours each.**

1st Five Choices (Course # & Name) Ex: COMM100 - Introduction to Communication	2nd Five Choices (Course # & Name) Ex: COMM100 - Introduction to Communication
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

Office Use Only -- CHC Student ID: _____

INTERNATIONAL STUDENT EXCHANGE & VISITING FINANCIAL SUPPORT FORM

This form is to be used for issuing immigration documents. For you to study in the United States at CHC, you need to show the U.S. Embassy/Consulate that you have financial support to study and live at CHC. Without this form being completed and attaching supporting documentation, CHC cannot issue immigration documents used to obtain a student visa.

Each exchange or visiting student attending CHC will be billed a different cost. Please e-mail Trachanda Garcia at garciat@chc.edu to obtain an estimated cost. Please indicate which niversity you are from, how long you are studying for (semester or year), and if you are going to be an exchange or visiting student. Once receiving this information, please proceed to complete the rest of the form and attach supporting documents.

PLEASE COMPLETE ALL INFORMATION:

Name: Family/Surname _____

First _____ Middle Name (if none, use "X") _____

Plan to study for the semester (insert year): FALL 20_____ OR SPRING 20_____
OR
ACADEMIC YEAR 20_____ to 20_____

STUDENT FINANCIAL STATEMENT:

I, _____ agree to pay the estimated amount of
(First and Family Name)

_____ USD (United States Dollars) to Chestnut Hill College.

Please Note: Your student bill will be provided to you upon arriving to CHC during International Student Orientation. Information on how to pay the bill will be provided at International Student Orientation.

FUNDING INFORMATION:

The total support necessary for time of study must be documented and available. Employment/salary letters and investments are the most reliable sources of support. If any funds are being provided by a sponsor (family or university), the sponsor must provide you with the necessary documentation to send to us. If personal funds are being used, bank statements must be attached in the student's name and be sufficient for the designated time of study.

The total amount of money I have available for study is $_____.
This amount includes the following:

$_____ personal funds

$_____ sponsor(s)

$_____ funds from Chestnut Hill College. Type: _____
(example: tuition exchange)

$_____ other, please specify: _____

I certify that the above information provided is correct and complete and that I shall notify Chestnut Hill College of any change in my financial circumstances.

Student's Signature: _____ Date: _____

CHESTNUT HILL COLLEGE- HOUSING PREFERENCE FORM

Welcome to the Student Life/Residence Life Department at Chestnut Hill College (CHC). We ask that you complete this compatibility profile form in its entirety and return it the Global Education Office with the rest of your exchange packet by the due date indicated by CHC. The Student Life/Residence Life Office uses this information in the roommate/room assignment process.

Please print clearly and legibly in English.

HOME INSTITUTION NAME: _____

NAME: Family_____ First _____ Middle_____

GENDER: ☐ Male ☐ Female **PHONE # (INCLUDE COUNTRY CODE)**: _____

PERMANENT ADDRESS (HOME COUNTRY): Address _____

City _____ State/Province _____Postal Code_____

Country _____ Email_____

All international students are housed in a traditional dorm or campus suite as available. All housing is co-ed (men and women) residence halls, but only same sex/genders room together separated by wing or floor. For more information visit the website at http://www.chc.edu/Undergraduate/Student_Life/Residence_Life/.

ROOMMATE PREFERENCES:** (Only mutual requests will be honored)

If you know of a United States student studying at CHC and would like this person to be your roommate:

Do you have any disabilities or special needs which could affect housing accommodations? ☐ Yes ☐ No

If yes, please specify: _____

_____

All CHC residence hall rooms and common areas are designated as Non-Smoking. Students and guests may choose to smoke off campus, while respecting others and Student Guidelines/ Policy. Even though every room will be non-smoking, there are still students who cannot tolerate a roommate who smokes (even outside of the halls). Please answer the following:

I would be bothered by a roommate who smokes (Select One): ☐ Yes ☐ No

Please Note: Very Important:

- All Hall, Floor and/or Roommate Preferences are honored whenever possible on a first-come, first-serve basis. The **earlier you** turn in your application to the Global Education Office, the more likely that Student Life/Housing Office can accommodate your wishes. Not all requests can be honored.

- CHC allows students who are having unsolvable roommate problems to change rooms providing that there are open spaces in which to move.

- **CHC International Exchange Student Requirement**: International exchange students admitted to CHC must live on-campus when they are enrolled at CHC and use the meal service provided.

PRIOR TO ARRIVAL TO CHESTNUT HILL COLLEGE,
HOUSING ASSIGNMENT INFORMATION WILL BE E-MAILED TO
THE ADDRESS PROVIDED ABOVE

International Student Pre-Arrival Form

International students who have been accepted to Chestnut Hill College (CHC) are required to submit a pre-arrival form **2 weeks before** the start of mandatory International Student Orientation. Public transportation to CHC is available via (SEPTA) www.septa.org, making plans prior to arriving is essential. This form should be completed and sent directly to Trachanda Garcia at garciat@chc.edu .

Please complete the following information leaving no blank spaces:

First Name: _____ Last Name: _____

Home Institution (if applicable):_____

Home Country: _____

Cell Phone Number (If you are able to use in the U.S.): _____

Personal E-mail: _____

Do you want a FREE airport pick up? (Check one): ☐ Yes ☐ No If you selected yes, complete the following:

Free airport pick-up is provided only at the Philadelphia airport on the first day of International Student Orientation

PHILADELPHIA, Pennsylvania International Airport (PHL)
Date (Month/Day/Year):
Time:
Airline Name:
Flight Number:

If your flight is delayed or cancelled, please contact the Global Education Office at 215-242-7989 or 215-242-7777.

If you selected no, (not arriving to PHL) complete the following:

Where is your point of entry into the U.S.A.?	
How will you be traveling to Philadelphia, P.A.?	
When will you be arriving (date and time)?	

Month/Day/Year Time

Contact the Global Education Office if travel arrangements are changed at garciat@chc.edu.

Please List an emergency contact:

Name _____ Relationship _____
City _____ State/Province _____
Postal Code_____ Country Name _____
Home Phone # (with country code) _____
E-Mail:_____