


The American English and Culture Program

NAME (family/last) (given/first) (middle initial) as written on passport					
ADDRESS IN HOME COUNTRY (P.O. box permitted)					
CITY / COUNTRY / POSTAL CODE					
COUNTRY OF CITIZENSHIP		COUNTRY OF BIRTH	COUNTRY OF LEGAL RESIDENCE	TELEPHONE:	
BIRTHDATE (month / day / year)	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	SESSION START DATES (see calendar on back of application): <input type="checkbox"/> Spring 2, 2010 <input type="checkbox"/> Fall 2, 2010 <input type="checkbox"/> Summer, 2011 <input type="checkbox"/> Summer, 2010 <input type="checkbox"/> Spring 1, 2011 <input type="checkbox"/> Fall 1, 2011 <input type="checkbox"/> Fall 1, 2010 <input type="checkbox"/> Spring 2, 2011 <input type="checkbox"/> Fall 2, 2011			FAX:
DO YOU NEED MORE INFORMATION ABOUT: University housing? <input type="checkbox"/> Yes <input type="checkbox"/> No Local housing? <input type="checkbox"/> Yes <input type="checkbox"/> No Homestays? <input type="checkbox"/> Yes <input type="checkbox"/> No		ARE YOU REQUESTING A TRANSFER FROM ANOTHER SCHOOL? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, include your current US address and a transfer letter from your current US school.			EMAIL ADDRESS:
IN WHAT COUNTRY WILL YOU APPLY FOR YOUR STUDENT VISA?					
WILL SPOUSE AND/OR CHILDREN ACCOMPANY? <input type="checkbox"/> Yes <input type="checkbox"/> No			If yes, complete the information below for your spouse and each child. If more lines are needed, attach a separate page with the additional information.		
DEPENDENT NAME	COUNTRY OF CITIZENSHIP	COUNTRY OF BIRTH	BIRTHDATE (month / day / year)	RELATION <input type="checkbox"/> Spouse <input type="checkbox"/> Male <input type="checkbox"/> Child <input type="checkbox"/> Female	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
DEPENDENT NAME	COUNTRY OF CITIZENSHIP	COUNTRY OF BIRTH	BIRTHDATE (month / day / year)	RELATION <input type="checkbox"/> Spouse <input type="checkbox"/> Male <input type="checkbox"/> Child <input type="checkbox"/> Female	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female
METHOD OF APPLICATION PAYMENT OF \$105 (includes application fee and express mail fee): <input type="checkbox"/> Money order enclosed (month / year)					
<input type="checkbox"/> Credit card (Visa, Mastercard, Discover): # <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Exp. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
AFTER STUDYING AT THE AECP, YOU WILL:			PLEASE TELL US WHERE YOU LEARNED ABOUT THE AECP:		
<input type="checkbox"/> Study for a: ___BA/BS ___MA/MS ___PhD <input type="checkbox"/> Return home <input type="checkbox"/> Other _____			<input type="checkbox"/> Past or present AECP student <input type="checkbox"/> Friend or relative in the US <input type="checkbox"/> Internet <input type="checkbox"/> Education fair <input type="checkbox"/> Advertisement <input type="checkbox"/> Agency _____		

-----Please cut and send upper portion to AECP. Retain lower portion for your records.-----

8-Week Session Program Costs (2009-2010)

Tuition.....\$1995

Student Services Fee\$150

Total\$2075

Additional 8-Week Costs

On-Campus Dormitory (estimated).....\$1500
or
Homestay (includes 2 meals per day).....\$1320

Medical Insurance (cost varies each cycle)\$176

Books and Supplies (varies)\$150

ASU ID (SunCard) Fee (one-time fee)\$25

Personal Expenses (varies, estimated).....\$400-\$600

Tuition, registration and program fees, and medical insurance must be paid in full at the beginning of the term. Students should arrive with cash, traveler's checks, Mastercard, American Express, and/or Discover cards.

To pay the \$105 non-refundable application and express mail fee, fill in your credit card number and expiration date above or mail a money order payable to:

Arizona State University

Email, fax or mail application, financial guarantee, and fee to:

Email: aecp@asu.edu

Fax: 480-965-8529

Mail: American English and Culture Program
P.O. Box 873504
Tempe, Arizona 85287-3504, U.S.A.

Phone: 480-965-2376

If you have questions, please contact us.

Access our website at: www.asu.edu/aecp

Material in this brochure is based on information available as of July 2010 and is subject to change without notice. Arizona State University vigorously pursues equal opportunity and affirmative action in its employment, activities and programs.



American English & Culture Program
 P.O. Box 873504
 Tempe, AZ 85287-3504, U.S.A.

STATEMENT OF FINANCIAL GUARANTEE

International students are required to certify that they have adequate resources to pay for the cost of tuition, fees, and living expenses while enrolled in the American English and Culture Program. **A minimum of \$5000 is required.**

Please indicate the source and amount of funds available (in U.S. dollars).

Source:

Personal Family Sponsor* Other

Amount: _____

Bank Verification (official stamp required)

Date: _____

I certify that the above information is a true and accurate statement of my financial resources and that these funds are available to pay for the program at AECP.

Signature of Student _____

* If sponsor is an organization and wishes to be billed directly for the program, AECP must receive a letter of financial guarantee with billing instructions before an I-20 will be issued.

AECP Session Calendar

2010

2011

Spring

SESSION 1 January 13 - March 12

SESSION 2 March 22 - May 14

Summer

June 2 - July 30

Fall

SESSION 1 August 18 - October 15

SESSION 2 October 20 - December 17

Spring

SESSION 1 January 12 - March 11

SESSION 2 March 21 - May 13

Summer

June 1 - July 29

Fall

SESSION 1 August 17 - October 14

SESSION 2 October 19 - December 16

Please apply at least one month before program begins.