

Dear Student:

Thank you for your interest in the Intensive English Language Program (IELP) at Portland State University. Application materials are enclosed. Please read **all** of the information in this packet. Carefully follow the instructions so that we can send you notification of your admission as soon as possible.

To apply for admission, complete the application forms and return your completed application packet to:

**Intensive English Language Program (IELP)**  
**Portland State University**  
**PO Box 751**  
**Portland, OR 97207-0751**

or send as an email attachment to: [ielpadmission@pdx.edu](mailto:ielpadmission@pdx.edu)

If you have any questions about our program or the application process, please contact us. We look forward to welcoming you to our program!

Sincerely,

Julie Haun, Director  
Intensive English Language Program  
Phone: 503-725-4088

[ielpadmission@pdx.edu](mailto:ielpadmission@pdx.edu)  
[www.ielp.pdx.edu](http://www.ielp.pdx.edu)

---

## IELP ACADEMIC ADMISSION REQUIREMENTS

In order to be academically admitted to the Intensive English Language Program, you must:

- Be at least 17 years of age
- Have completed high school/secondary school or its equivalent

All IELP courses are conducted in English. We recommend that students have already had prior academic exposure to the language.

Review of your application for admission will begin upon receipt of the application fee (\$150; non-refundable if not admitted) Students who will request an F-1 visa must provide proof of financial support for the duration of study in the program. A form I-20, certificate of eligibility for an F-1 student visa, cannot be issued without the required financial information.

## TERM CALENDAR 2015-16

	Fall 2015	Winter 2016	Spring 2016	Summer 2016
<b>Mandatory Orientation and Placement Testing:</b>	September 22 through 25	January 4 through 6	March 22 through 25	June 14 through 17
<b>Schedule Pick-up Day:</b>	September 25	January 6	March 25	June 17
<b>Classes start:</b>	September 28	January 7	March 27	June 20
<b>Last day of the term:</b>	December 10	March 17	June 9	August 12

- Please confirm application deadlines on the IELP website.
- Please plan to arrive at least one week before the start of the term.
- All new IELP students must take the placement test.
- Late arriving students who miss the placement exam, registration day, or the first week of classes may not be able to attend classes until the following term.

## ESTIMATED TUITION, FEES AND LIVING EXPENSES FOR 2015-2016 ACADEMIC YEAR (PER TERM)

	U.S Dollars <b>Academic Preparation programs</b>	U.S Dollars <b>Pre-Entry Program</b>
Application Fee <b>(one time only, nonrefundable, payable online with credit card)</b>	150	150
Tuition (22 hours/week for Pre-Entry Program, 18 hours/week for all other programs)	3,825	4,675
*Supplemental Learning Lab Fee	n/a	30
* Learning Center and Engagement fees	190	190
*Student Health Center fee/basic insurance plan	119	119
*Health insurance/extended plan	694	694
*University Fees	293	293
IELP New Student Program Fee	100	100
Total tuition and fees	<b>5,221</b>	<b>6,101</b>
Rent (3 months)	1,950	1,950
Food (3 months)	1,200	1,200
Personal expenses (transportation, etc.)	1,142	1,142
Books and supplies	300	300
Total living expenses	<b>4,350</b>	<b>4,350</b>
<b>Total estimated tuition, fees and living expenses</b>	<b>9,724</b>	<b>10,604</b>

\*Required fees NOTE: Tuition and fees are subject to change at any time.

### PLACEMENT TEST AND CLASS REGISTRATION

New students must take the placement test. The results of the test will determine your level of study. If you are not able to arrive in time for the placement test, you may have to wait until the next term to begin the program. Contact the IELP office to discuss your options.

Students must attend classes and make an effort to improve their skills and advance in their levels in order to continue in the program.

### HEALTH INSURANCE REQUIREMENT

Students in F-1 status and their dependents in F-2 visa status are required to pay for the extended health insurance policy, offered through Portland State University, each term of study. Students will be covered by a comprehensive health insurance policy and will also be able to use the Student Health and Counseling Center on the PSU campus. Students sponsored by a government agency may submit proof of sufficient coverage and waive this requirement.

### HOUSING

You are responsible for finding your own housing. For more information please see our website at <http://www.pdx.edu/esl/housing-options>. Plan ahead. Space in university housing is limited. We recommend that you begin to search for housing now.

### F-1 STUDENT VISA INFORMATION

Upon admission to the IELP you will receive:

- An official admission letter
- A form I-20, certificate of eligibility for an F-1 student visa and instructions for applying for your visa
- Important information about the program

When you receive your form I-20 you will:

- Pay the required SEVIS I-901 fee of \$200 via the internet at [www.fmjfee.com](http://www.fmjfee.com)
- Print your receipt for the SEVIS I-901 fee
- Make a visa appointment at the nearest U.S. consulate or embassy
  - \*You may be able to make your visa appointment before paying the SEVIS I-901 fee. Check with the consulate/embassy where you will make your appointment. Proof of payment of the fee must be presented at the visa interview.
  - \*All visa forms must be completed online.

### Useful immigration resources:

Find a U.S. consulate or embassy: [www.usembassy.gov/](http://www.usembassy.gov/)

Visa application forms: [www.state.gov/m/a/dir/forms/](http://www.state.gov/m/a/dir/forms/)

Additional information about F-1 student visas: [www.travel.state.gov/visa/temp/types/types\\_1268](http://www.travel.state.gov/visa/temp/types/types_1268)

If you have immigration or visa questions, please email Pilar Montejo, IELP International Student Advisor, at [pilar.montejo@pdx.edu](mailto:pilar.montejo@pdx.edu).

**Plan ahead. Allow two to three months for the entire application and student visa process to be completed.**

## PAY IELP APPLICATION FEE

Payment options:

1. Credit card\* payment online at <https://commerce.cashnet.com/ielp>

\*Payments made by credit card will be assessed a \$3.75 service fee.

2. Check or cash payment mailed or in person.

## INSTRUCTIONS FOR IELP APPLICATION

Include the following items in your application packet and complete this checklist:

- 1. Completed Application and USD \$150 application fee** by draft/check/credit card/cash payable to Portland State University. **Your application will not be processed without payment. Admission materials for new international students will be sent via express mail.** Admission materials for transfer students will be sent via standard mail.
- 2. Proof** of secondary/high school completion in original language and in English **OR** an official copy of graduation certificate **OR** university transcript (submit only one of the three options listed)
- 3. Confirmation of Measles (Rubeola) Immunization (form included in application)**

*Note: U.S. permanent residents and U.S. citizens do not need to complete steps four and five.*

- 4. Declaration of Finances.** Include an **official statement from your bank or your sponsor's bank** indicating that sufficient funds are available to pay for your studies and expenses. See details below for additional information.
- 5. Copy of your passport identification page**
- 6. Transfer Clearance Form** if you are transferring from a school within the United States. This form must be completed by your international student advisor to verify your current U.S. immigration status.

**Note: Do not leave your current program until you have received confirmation of your admission to the IELP.**

**Omission of any required document will result in a delay in processing your application, or in rejection.**

Send completed application and all required documents to:

**Intensive English Language Program**  
**Portland State University**  
**PO Box 751**  
**Portland, OR 97207-0751**

Street address (for express mail only):  
**Intensive English Language Program**  
**527 SW Hall Street, Suite 400**  
**Portland, OR 97201 USA**  
**Phone: 503-725-9185**

Completed application and supporting documents may also be sent via email to: [ielpadmission@pdx.edu](mailto:ielpadmission@pdx.edu).

---

## DECLARATION OF FINANCES--Explanation of sources of financial support

### PERSONAL FUNDS

Student's **own** savings or draft/checking account funds **in English**. An **original** letter on bank stationary indicating sufficient funds to cover all course fees and estimated costs. The name of the account holder and the present balance are required.

### FAMILY FUNDS

Student's **family** savings or draft/checking account funds **in English**. This must be an **original** letter on bank stationary indicating sufficient funds **in English**. The name(s) of the account holder and the present balance are required. Real estate holdings, personal property, and common stock holdings **should not** be used to confirm financial support.

### PRIVATE SPONSOR OUTSIDE THE UNITED STATES

**Private sponsor's** savings or draft/checking account funds. An **original** letter on bank stationary indicating sufficient funds and the name of the account holder **in English** is required. Real estate holdings, personal property, and common stock holdings **should not** be used to confirm financial support.

### PRIVATE SPONSOR IN THE UNITED STATES

Submit a **copy** of Form I-134, Affidavit of Support. Attach a copy of the supporting documents as noted in Part II--Supporting Evidence of the Form I-134. Go to [www.uscis.gov/files/form/I-134.pdf](http://www.uscis.gov/files/form/I-134.pdf) for this form. The **original** I-134 and supporting documents must be submitted with the vis application.

### GOVERNMENT OR AGENCY SPONSOR

An original official letter of sponsorship or scholarship. Full disclosure of the extent and amount of government or agency support is necessary, including dates of sponsorship and special conditions.

### OTHER RESOURCES

List specific details of other means of financial support. Provide documentation of the availability of funds.

# IELP APPLICATION FORM - Page 1

My first term of study will be:  Fall 2015 September - December  Winter 2016 January - March  Spring 2016 April-June  Summer 2016 June - August

How long do you wish to study in this program? Choose one:

1 term  2 terms  3 terms  1 year or more

**I. Please spell your name exactly as it appears on your passport. Include a copy of your passport identification page with this application.**

Family name (surname)			First name			Middle name		
<input type="checkbox"/> Female			<input type="checkbox"/> Male					

Country of birth

Country of citizenship  Date of birth (month/date/year)

**Current address :**

Street address		Apartment number	
City	State/Province	Country	Postal Code
Phone number		Fax number	
Email address (must be applicant's personal email)			

**Permanent address in home country (required for immigration purposes):**

Street address		Apartment number	
City	State/Province	Country	Postal Code

Name and telephone number of closest family member:

**Would you like to give anyone permission to ask about your application? If so, please list name(s):**

Do you need an I-20 for F-1 student visa status?  yes  no

**Would you like your form I-20, certificate of eligibility for an F-1 student visa, to be picked up in the IELP office?**

yes  no

If **yes**, by whom:

Name	Email Address	Phone Number
------	---------------	--------------

If **no**, your I-20 will be sent to the current address listed above.

If you are currently in the United States on an international non-immigrant visa, what kind of visa do you have?

F-1  J-1  B-2 Other:   n/a

If you are currently attending another school in the U.S., write the name of the school that issued your I-20:

School	Dates of attendance
--------	---------------------

**II. Proof of secondary school completion in original language and in English OR an official copy of graduation certificate OR university transcript (only one of three options listed) must be submitted with this application.**

When did you complete your high school education?  (month/year)

How many years have you studied English?  years

Dates of study: from  (month/year) to  (month/year)

High school/Secondary school attended:

Name	City	Country

Colleges/universities attended:

Name	Dates attended	Degree awarded

How did you learn about our Intensive English Language Program?

- family   
  friend   
  IELP website   
  Internet search   
  agent   
  other

After studying in the IELP, you will:  return home   
  study for a degree at PSU   
  study for a degree at another university

other

If studying for a degree, what level?  bachelor's   
  master's   
  Ph.D.

Field of study

**III. If your spouse and/or children will accompany you, complete the following and include a copy of each person's passport identification page. *\*Your spouse and/or children must apply for an F-2 visa and you must submit proof of finances to cover living expenses for your family.***

**SPOUSE:**

Name	birth date	country of birth	citizenship		
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Family name	Given name	month/day/year			

**CHILDREN:**

Name	birth date	country of birth	citizenship		
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Family name	Given name	month/day/year			

Name	birth date	country of birth	citizenship		
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Family name	Given name	month/day/year			

Name	birth date	country of birth	citizenship		
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Family name	Given name	month/day/year			

COMPLETION OF THIS FORM IS REQUIRED

## International Student Measles and Mumps Vaccine Requirement (MMR) Intensive English Language Program

Complete this form and return it with your IELP application.

**INTERNATIONAL STUDENTS MUST PROVIDE DOCUMENTATION BEFORE ATTENDING CLASSES.**  
You will not be permitted to register for or attend classes if you do not meet the MMR vaccine requirement.

If you do not have the required MMR vaccines before arriving at Portland State University, you may obtain an MMR vaccination at the student health clinic on campus. The cost is approximately \$61.

<input type="text"/>			<input type="text"/>
Last Name	First Name	Middle Initial	PSU I.D. (if known)
<input type="text"/>			<input type="text"/>
Street Address			Date of Birth (Month/Day/Year) - <b>Required</b>
<input type="text"/>			<input type="text"/>
City, State, and Zip Code			Signature - <b>Required</b>

The Oregon State System of Higher Education requires all incoming students to show evidence of immunity to measles (Rubeola) and mumps. Many students have only received one dose of Measles, Mumps, and Rubella vaccine (MMR), and therefore a booster dose of MMR vaccine must be obtained.

All entering students born after 1956 must have at least one of the following:

- Two vaccinations of MMR. The first does must have been received on or after the first birthday. There must be a minimum of 30 days between the first and second dose.
- Physician's signature showing evidence of immunity to measles (Rubeola) and mumps.
- Physician's signature certifying prior measles (Rubeola) and mumps.

**Please indicate the dates on which the two required doses of MMR vaccination were received:**

**Dose #1:**

Month/Day/Year

**Dose #2:**

Month/Day/Year

**Please submit this completed form with your IELP application.**

**Or send this form to:**

Center for Student Health and Counseling

P.O. Box 751

Portland, OR 97207

Fax: 503-725-5812 (Fax on white paper ONLY)

Email: measles@pdx.edu

**DO NOT SEND ORIGINAL MEDICAL/IMMUNIZATION DOCUMENTS.**

If you have any questions regarding this requirement, contact the Center for Student Health and Counseling at 503-728-2800 or visit our website at [www.pdx.edu/shac/](http://www.pdx.edu/shac/).

**\*\* SEE NEXT PAGE REGARDING EXEMPTIONS\*\***

## International Student Measles and Mumps Vaccine Requirement (MMR) Intensive English Language Program

**EXEMPTIONS: Complete this page only if you wish to be exempted from the MMR vaccine requirement.**

### Age Exemption:

Please initial if born before 1957:

### Medical and Religious Exemptions:

Individuals with religious or medical exemption(s) (except a verified history of disease or blood test indicating immunity to Rubeola and Mumps) are not protected against measles and mumps. This means that they are at risk for getting the diseases. **In the event of an outbreak, individuals with a religious or medical exemption for measles and mumps may be excluded from the University, under the direction of the Student Health Service Director and/or the local Health Officer.**

### Medical Exemptions:

Acceptable bases include:

- Serious allergic reactions (anaphylactic) to a previous dose, or to Neomycin or gelatin.
- Pregnancy or intent on becoming pregnant within 28 days.
- Immunosuppression such as occurs with cancers (leukemia, lymphoma) or medications for such diseases.
- Taking high doses of cortisone-type medications for more than 2 weeks.

### Note: All medical exemptions require a physician's signature.

Individuals with HIV-positive antibodies or with leukemia in remission who have not received chemotherapy for at least three months may receive MMR vaccine.

### Certification:

I certify that this individual should be exempted from the MMR vaccine requirements based on:

A. History of disease (provide year):	Rubeola	<input type="text"/>	Mumps	<input type="text"/>
B. Immune Titers:	Rubeola Result	<input type="text"/>	Date	<input type="text"/>
	Mumps Result	<input type="text"/>	Date	<input type="text"/>

C. The following medical reason:

Which constitutes a medical contraindication in accordance with the advisory committee on immunization practices of the U.S. Public Health Service for MMR vaccine (see above).

**Physician's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

### Religious Exemptions:

I have read and understood the above information. I am adherent to a religion, the teachings of which are opposed to immunizations, and therefore request that I be exempted from the immunization requirement.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Are you currently studying at a school in the U.S.?

Yes. Complete this page.

No. Do not complete this page. Go to page 6.

**TRANSFER CLEARANCE FORM FOR STUDENTS IN F-1 STATUS and currently attending a school in the U.S.**

NOTICE TO TRANSFER STUDENTS: You must submit this Transfer Clearance Form as part of your completed application. Give this page to your International Student Advisor at your current school

**Please complete if transferring from a U.S. institution.**

Family Name	(First Name)	Date of birth
-------------	--------------	---------------

**To be completed by your current international student adviser if you are in F-1 student status.**

1) Dates of attendance at your institution:

From: \_\_\_\_\_ To: \_\_\_\_\_

2) For which term was this student last enrolled full-time at your institution?

\_\_\_\_\_

3) Has this student maintained legal status with U.S. immigration regulations:

yes

no

If no, please explain the circumstances.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4) Please comment on student's attendance and performance, if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) SEVIS ID# \_\_\_\_\_

6) Date of release in SEVIS \_\_\_\_\_

\_\_\_\_\_  
Signature of school official Name and title Date

\_\_\_\_\_  
Institution City and State Email Telephone

Please return to: **Intensive English Language Program  
Portland State University  
PO Box 751  
Portland, OR 97207-0751**

Or email to: **ielpadmission@pdx.edu**

Or return to student to submit with application form.



