



***Thank you for requesting the CPTC International Admission Application Packet!***

To complete your admission, please fill out the following forms and submit with the documents below:

**FORMS**

- International Education Admissions Form
- International Financial Responsibility Verification Form
- International Student Health Insurance Agreement
- Credit Card Authorization Form (only if you wish to pay your application fee by credit card)

**DOCUMENTS**

- **Original bank statement or official letter from your bank manager w/ signature on the bank's letterhead**  
The bank statement/letter should be:
  - No older than 6 months
  - Shows funds sufficient for the first year of your study
  - The cost for tuition, fees, health insurance, instructional materials (textbooks, clothing, tools, etc.), homestay and personal expenses for 4 quarters (12 months) varies depending on your program of study. **Please contact us for a total amount needed for your bank statement.**
  - If you have dependent(s) coming to US with you, add **\$2,250** per each dependent family member
  - Photocopy/scanned copy of financial documents, on-line or ATM printout of account balance will NOT be accepted
- **Affidavit of Support** (if you have a sponsor living in the US)
- **Application Fee - \$50.00** (one-time only, non-refundable)  
The application fee is payable by personal check, money order, or credit card with authorized signature. For credit card payment, please use the attached Credit Card Authorization Form.
- **Copy of your passport**
- **Proof of English Proficiency** (TOEFL or IELTS, etc. Please contact us for the scores required for admission)
- **A passport size photo**
- **A short essay about you and your education & career goals**

**HOUSING**

If you wish to live with American host family, please let us know. Pierce College's Housing Office helps us with homestay placement. We will send you Peirce College's Homestay Placement Application Form. The placement fee is \$250 (non-refundable).

**If you are TRANSFERING TO CPTC:**

In addition to the forms and documents listed above, please also submit the followings:

- **International Student Transfer Eligibility Verification Form**  
(To be completed and signed by you and the international advisor of your current school)
- **Copy of all your I-20s**
- **Copy of your passport, visa, and I-94**
- **Official transcripts from your previous and current schools in U.S.**

If you have any questions, please feel free to contact us at International Education Programs by calling 253.589.6089 or via e-mail at [International@cptc.edu](mailto:International@cptc.edu).

Thank you for choosing Clover Park Technical College! We look forward to welcoming you to CPTC soon!







## International Student Health Insurance Agreement

ALL international students studying in the United States are required to carry a valid health insurance that covers medical expenses in the U.S. ***Because medical cost in the U.S. is very expensive***, it is important that you carry a health insurance in case of unexpected illness and injuries.

As F-1/M-1 international student, you must carry a valid health insurance while maintaining a visa status. This includes while you are enrolled in classes, during a vacation quarter, AND during OPT (Optional Practical Training).

Clover Park Technical College offers the health insurance through ***Firebird International Insurance Group, LLC***. The insurance premium for 2013-2014 is **\$288.35** per quarter (three months), which is charged automatically upon registration.

*Note: The OPT students are no longer eligible for the College insurance. There is other insurance option, so please contact the International Programs Office staff for more information.*

Not all medical treatments/prescription drugs are covered by this insurance. Please read the ***Blanket Student Accident & Sickness Plan*** (the insurance booklet) carefully and familiarize yourself with what treatments are covered and what conditions are excluded under the insurance. Please do not hesitate to ask if you have any questions.

If you have your own health insurance from your country, the quarterly insurance fee will be waived, but the insurance **MUST** have an equal or better coverage than the insurance offered by the College. Please submit a copy of your insurance card/document to International Programs Office for evaluation and as a proof of insurance coverage.

Please check the box, sign and date below:

- I need the health insurance from CPTC
- I have my own insurance that is equal to or better than the College insurance. I will submit a proof of my insurance.

I, (print name) \_\_\_\_\_, understand that all international students must carry a valid health insurance while studying in the United States. I agree to pay the insurance fee each quarter, or keep my own insurance valid, while I am enrolled, while I'm on a vacation quarter or while I'm on OPT. I also understand that I'm required to get the College insurance if my own insurance coverage is not equal to or better than the College insurance. When my own insurance expires, I will renew it in a timely manner and submit a copy of the new insurance card/document to International Programs Office.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## CREDIT CARD AUTHORIZATION FORM

International Education Programs  
4500 Steilacoom Blvd. SW  
Lakewood, WA 98499 USA  
Tel: 253.589.6089 Fax: 253.589.6054  
Email: International@cptc.edu

**Student Name:** \_\_\_\_\_

**Student ID#: 975 -** \_\_\_ - \_\_\_\_\_

**Name of Card Holder:** \_\_\_\_\_

**Billing Address for this card:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Card Type (circle one):**    **Visa**        **MasterCard**    (\*AMEX and Discovery Card are NOT accepted)

**Card Number:** \_\_\_\_\_

**Expiration Date:** \_\_\_\_ / \_\_\_\_

**Security Code:** \_\_\_\_\_

*(The security code is the last 3 digit numbers on the back of your card)*

**Amount to be charged in US dollars:**

- Application Fee (M7): \$50
  - Housing Fee (M8): \$150    (This fee is NOT the ABODE Homestay application fee)
  - Health Insurance Fee (M9): \$288.35
  - Tuition & Fees: \$ \_\_\_\_\_
  - Other (please specify): \$ \_\_\_\_\_ for \_\_\_\_\_
- Total:** \$ \_\_\_\_\_

\_\_\_\_\_  
**Signature of Card Holder**

\_\_\_\_\_  
**Date**

**Important Note:** An original copy of this form is needed to process charges.

Please print this form and send with your application by mail to:

International Education Programs  
Clover Park Technical College  
4500 Steilacoom Blvd. SW  
Lakewood, WA 98499 U.S.A.