



Intensive English Program Application for Admission

Please print or type all information.

Section 1: Personal Information

Full name: Please enter name as it appears on your passport .

Gender:

Male Female

Family Name (Surname)

First Name (Given Name)

Middle Name (if any)

Date of Birth:

____ / ____ / ____
Month Day Year

Country and city of birth

Country of citizenship

Native Language

Contact Information: (Please include area/country code)

Permanent telephone (number in your country)

Local Telephone (number in the U.S.)

E-mail address

Permanent Foreign Address: (in your home country)

Number/Street

City

State/Province

Country

Zip Code

Local U.S. Address:

Number/Street

City

State

Zip Code

How did you hear about the University of Miami Intensive English Program?

Former student - Name: _____

IEP Representative - Name: _____

Internet search engine/website: _____

Other: _____

Section 2: Visa information

Do you presently have a United States visa? Yes No If yes, what type? _____

Are you a transfer student currently in the United States with an I-20? Yes No

If yes, what school issued your I-20? _____ School's phone number: _____

Are you a legal permanent resident of the United States? Yes No If yes, please attach a copy of your permanent resident card.

Are you a United States citizen? Yes No If yes, please attach a copy of your US passport.

Section 3: Please choose the session you would like to attend

14-WEEK SESSION

Sept. 3, 2013 - Dec. 13, 2013

Jan. 7, 2014 - April. 18, 2014

May. 6, 2014 - Aug. 8, 2014

6-WEEK SESSION

Oct. 17, 2013 - Dec. 13, 2013

Feb. 20, 2014 - April 18, 2014

June 19, 2014 - Aug. 8, 2014

Section 4: Application Checklist

- 1. Completed application
- 2. Nonrefundable/nontransferable application fee of U.S. \$100.00
- 3. Passport-sized photograph for applicant and dependent
- 4. Passport I.D. page for applicant and dependent
- 5. Original bank verification letter and/or scholarship letter

Send application materials to:

Intensive English Program
University of Miami
5050 Brunson Drive
111 Allen Hall
Coral Gables, FL 33124-1612
USA

Questions? Contact us at:

Phone: (305) 284-2752
Fax: (305) 284-3633
email: iep@miami.edu
web: www.miami.edu/iep

Section 5: Statement of Financial Eligibility

Fill out this section only if you are requesting a SEVIS form I-20. All students requesting an I-20 must demonstrate evidence of financial support for their stay in the U.S.

Financial declaration: Approximate cost of one 14-week session at the University of Miami Intensive English Program is **\$15,500.00**. The approximate cost for the 6-week session is **\$8,800.00**. This cost includes tuition, fees, books, accommodations, meals on campus, and personal expenses. An additional **\$4,500.00** per session is required for each dependent included on the Form I-20.

Please indicate the person or organization responsible for your expenses during your stay at the University of Miami Intensive English Program.

<input type="checkbox"/> Myself	<input type="checkbox"/> Parents	<input type="checkbox"/> Other relative	<input type="checkbox"/> Employer
<input type="checkbox"/> Friend	<input type="checkbox"/> Government	<input type="checkbox"/> Other: _____	

Sponsor's Full name:

_____	_____	_____
Family Name (Surname)	First Name (Given Name)	Middle Name (if any)

Sponsor Contact Information: (Please include area/country code)

_____	_____	_____
Telephone	Fax	E-mail address

Sponsor's Address:

_____	_____	_____	_____	_____
Number/Street	City	State/Province	Country	Zip Code

Dependents:

Do you want to include your spouse and/or children on the SEVIS Form I-20? Yes No
If yes, please provide the following information and submit a copy of the passport I.D. page for each person. (Attach additional sheets if necessary)

Dependent's full name as it appears in his/her passport: _____ Date of Birth: _____

_____	_____	_____	____/____/____
Family Name (Surname)	First Name (Given Name)	Middle Name(s) (if any)	Month Day Year

_____	_____	_____
Country and city of birth	Country of citizenship	Relationship

Section 6: Application Fee

Before signing this form please read the following carefully and check the boxes next to the statements.

- 1. Enclosed is my application fee of \$100.00 payable to the University of Miami. I understand that this application fee is nonrefundable and nontransferable.
- 2. All information contained in my application is complete, factually correct, and honestly presented.
- 3. If I enroll in the IEP, I agree to follow the University of Miami Honor Code, a document that prohibits dishonesty in all academic work.
- 4. I understand that application for admission to the Intensive English Program does not constitute or guarantee admission to any University of Miami degree program.

Section 7: Signatures

I certify that I have read and understand the statements in section 6 of this form. I certify that the statements and information I have provided on this form are complete and accurate to the best of my knowledge. My signature below indicates that I am registering for this course and that I am responsible for full payment of all the costs for the IEP program.

_____	_____	_____	_____
Signature of applicant	Date	Signature of sponsor	Date



OFFICE USE ONLY

Session: _____

I.D. #: _____

Application fee:

FT: _____ PT: _____