International Student—Application for Admission

DATE OF APPLICATION SUBMIT COMPLETED FORM TO: **INTERNATIONAL CENTER** APPLICATION FEE: \$35 Bunker Hill Community College Make check, bank draft or money order payable to Bunker Hill Community College. 250 New Rutherford Avenue Boston, Massachusetts 02129-2925, USA ARE YOU CURRENTLY IN THE U.S.? Yes No NAMF LAST NAME/FAMILY NAME MIDDLE NAME (if applicable) STUDENT'S ADDRESS IN YOUR HOME COUNTRY (REQUIRED) U.S. MAILING ADDRESS (IF ANY) STRFFT STREET APARTMENT# APARTMENT# CITY/STATE/ZIP CITY/STATE/COUNTRY/POSTAL CODE TELEPHONE AREA CODE/TELEPHONE E-MAIL ADDRESS E-MAIL ADDRESS CELL PHONE WILL YOU NEED HOUSING IN BOSTON? ☐ Yes ☐ No DATE OF BIRTH _ **GENDER:** □ Male □ Female Month Day COUNTRY OF BIRTH ____ COUNTRY OF CITIZENSHIP SEMESTER YOU PLAN TO START: ☐ September ☐ January ☐ June IF YOU ARE IN THE U.S., LIST TYPE OF VISA STAMPED IN PASSPORT: _______ VISA ISSUE DATE: _____ _____ I-94 ARRIVAL DATE: ___ IS ENGLISH YOUR FIRST LANGUAGE? Yes No (IF NO, LIST FIRST & SECOND LANGUAGES) _ IF ENGLISH IS NOT YOUR FIRST LANGUAGE, HAVE YOU EVER TAKEN THE TOEFL TEST? Yes NO (IF YES, SUBMIT AN OFFICIAL COPY OF THE RESULTS) LIST HIGH SCHOOL YOU HAVE ATTENDED/GRADUATED: Name of High School ____ ______ Date of Year Started and Graduated _ LIST ANY COLLEGES AND/OR POST-HIGH SCHOOL INSTITUTIONS YOU HAVE ATTENDED: Name of College ____ ____ State ____ ___ Country ___ ___ State ____ _____ Country ____ HIGHEST DEGREE EARNED: ☐ High School or Equivalent ☐ Associate Degree ☐ Bachelor's Degree

Application for admission continued on back of page.

ARE YOU REQUESTING TRANSFER CREDITS? ☐ Yes ☐ No

BHCC ETHNICITIES (PLEASE CHECK ONE): U Hispanic	/Latino 🛭 Non Hispanic/La	atino			
BHCC RACE (PLEASE CIRCLE ONE OR MORE):					
Al—American Indian/Alaska Native AD—I HP—Native Hawaiian or Other Pacific Islander NR—	Black/African American Non-resident Alien		CV—Cape Verde WH—White	ean	
PLEASE CHECK ALL CATEGORIES THAT APPLY:	New student, never attended	d any college 📮 Trans	sfer Applicant 🛭 R	e-admit/Previous Student	
TO WHICH PROGRAM ARE YOU APPLYING? PRINT	CODE (REFER TO LIST OF PR	OGRAM CODES BELOW) _			
☐ CHECK HERE IF APPLYING TO GENERAL CONCEN	TRATION/PRE-HEALTH PRO	GRAM			
DO YOU PLAN TO TRANSFER TO A FOUR-YEAR CO	LLEGE? 🗆 Yes 🗔 No				
BHCC PARTICIPATES IN JOINT ADMISSIONS PROGR. Please indicate your interest in receiving more inform			d Universities and S	Suffolk University.	
☐ Commonwealth of Massachusetts State Colleges	and Universities Joint Admi:	ssions Programs 🗌 Su	ffolk University Join	nt Admissions Program	
I PLAN TO ENROLL AT BHCC (PLEASE CHECK ONE): ☐ In a Degree Program 〔	☐ In a Certificate Prog	ram		
HOW DID YOU FIRST HEAR ABOUT BHCC? (PLEASE	CIRCLE ONE):				
1. Embassy 2. BHCC Alumni 6. Guidance Counselor 7. International Center	3. BHCC website8. Telephone Inquiry		d/Relative net Inquiry	Peterson's GuideOther	
ADMISSION DEADLINES:					
FALL SEMESTER July 15 (students outside U.S.) August 15 (students within U.S.)	July 15 (students outside U.S.) November 30 (students outside U.S.)		April 21 (SUMMER TERM I April 21 (students outside U.S.) May 15 (students within U.S.)	
I CERTIFY 1 APPLICANT'S SIGNATURE	THAT ALL INFORMATION ST			ATE AND COMPLETE.	
APPLICANT'S SIGNATURE PROGRAM CODES ASSOCIATE IN ARTS DEGREES Business Concentration	BADM Computer Information Te	echnology Program:	DATE	CERTIFICATE PROGRAMS Allied Health:	СТ АНМПА
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