



# APPLICATION FOR ADMISSION

(Please print clearly or type. This form must be complete for your application to be considered)

# How Did You Hear About Us?

- Internet search       Agent (name) \_\_\_\_\_       Friend or family member  
 CWC alumni (name) \_\_\_\_\_       Current CWC student (name) \_\_\_\_\_  
 Other (please specify) \_\_\_\_\_

## PERSONAL INFORMATION

**Student Name** \_\_\_\_\_ **Gender** M  F

**US Address** \_\_\_\_\_  
(If Available) Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Home Country Address** \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ Province/State \_\_\_\_\_

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**Zip Code** **Country**

Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Country of Citizenship** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_

**City / Country of Birth** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_  
(MM/DD/YYYY)

**Emergency Contact** \_\_\_\_\_

**Educational Level Completed:** High School  2-Year College  University  Post University

**Visa Status:** E-1  Other Visa  Legal Resident

If you plan to have your dependents live with you while you are attending CWC, please list them below:

## ENROLLMENT INFORMATION

The chart below provides program information only. Information about total program charges for CWC's ESL programs is available in the CWC Catalog and Enrollment Agreement.

TUITION					
PROGRAMS	4 WEEKS	12 WEEKS	24 WEEKS	36 WEEKS	48 WEEKS
Essential English	<input type="checkbox"/>				
Essential English Plus	<input type="checkbox"/>				
TOEFL	<input type="checkbox"/>				
University Preparation	<input type="checkbox"/>				
Business English	<input type="checkbox"/>				
English Through American Culture	<input type="checkbox"/>				
American Communication	<input type="checkbox"/>				
Part-Time English	<input type="checkbox"/>				

PROGRAM START DATES			
	MODULE A	MODULE B	MODULE C
<b>WINTER TERM</b>	<input type="checkbox"/> January 7, 2019	<input type="checkbox"/> February 4, 2019	<input type="checkbox"/> March 4, 2019
<b>SPRING TERM</b>	<input type="checkbox"/> April 8, 2019	<input type="checkbox"/> May 6, 2019	<input type="checkbox"/> June 3, 2019
<b>SUMMER TERM</b>	<input type="checkbox"/> July 8, 2019	<input type="checkbox"/> August 5, 2019	<input type="checkbox"/> September 2, 2019
<b>FALL TERM</b>	<input type="checkbox"/> September 30, 2019	<input type="checkbox"/> October 28, 2019	<input type="checkbox"/> November 25, 2019

## HOUSING AND TRANSPORTATION REQUEST

**Do you need Housing Assistance?** Yes  No  \$150 Placement fee applies. Please ask for a Housing Application Form.

Start Date \_\_\_\_\_ (MM/DD/YYYY) End Date \_\_\_\_\_ (MM/DD/YYYY)

**Airport Pick-up?** Yes  No  \$85 Airport Pick-Up fee applies. Please ask for an Airport Pick-up Request Form.

Airline/Flight No: \_\_\_\_\_ (MM/DD/YYYY) Arrival Date/Time: \_\_\_\_\_ (MM/DD/YYYY)

## PAYMENT

You can pay online at: <https://www.columbiawestcollege.edu/onlinepayment/>

**OR** provide your credit card information below

Application Fee: \$150.00     I-20 Mailing Fee: \$75.00    Other: \$\_\_\_\_\_ Total: \$\_\_\_\_\_

Visa  MasterCard  AmEx Credit Card Number: \_\_\_\_\_

Exp. Date: \_\_\_\_ / \_\_\_\_ Zip/Postal Code: \_\_\_\_\_ CVV: \_\_\_\_\_ Signature: \_\_\_\_\_

## SIGNATURE

I acknowledge that I have read, understood and agreed to all the terms in this application. I certify that I will be fully responsible for all expenses, including, but not limited to school, living and medical expenses, while attending Columbia West College.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_  
(MM/DD/YYYY)

Parent or Guardian Signature \_\_\_\_\_

(Required if applicant is under the age of 18)

Date \_\_\_\_\_  
(MM/DD/YYYY)