

# AMERICAN ENGLISH LANGUAGE INSTITUTE

Stephen F. Austin State University

Nacogdoches, Texas 75962

## Application for Admission

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**Return to:** American English Language Institute  
Stephen F. Austin State University  
Box 6152  
Nacogdoches, TX 75962-6152

A \$40 application fee must accompany application. Fee must be paid in American currency, cashier's check, or international money order. Also enclose two passport photos. Your application can be processed only after all necessary documents and the application fee have been received.

Please print the appropriate information in the spaces provided for each question. Applications with information missing will be returned to applicant for correction. The information on marital status and gender is required for state and federal reporting; however, it has no bearing on admission.

### Applicant information:

Full legal name – Last (Family), First Name, Middle

Name \_\_\_\_\_

Date of Birth: \_\_\_\_\_

This application for: Year \_\_\_\_\_ & Semester (check one) \_\_\_ Fall \_\_\_ Spring

Email address: \_\_\_\_\_

Current Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Country of Birth \_\_\_\_\_

Permanent Address in Home Country \_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_

Gender (check one) \_\_\_\_\_ Male \_\_\_\_\_ Female

If married, give spouse's name and country of citizenship: \_\_\_\_\_

Number of dependents who will accompany you to the U.S. (including spouse): \_\_\_\_\_

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**High School Information:**

High School Attended: \_\_\_\_\_

Location: \_\_\_\_\_ Date of Graduation or Expected date of Graduation: \_\_\_\_\_

All applicants must submit an official copy of the diploma or high school transcript.

**Language and Testing Information:**

Native Language (language spoken at home) \_\_\_\_\_

Results of the Test of English as a Foreign Language (TOEFL), IELTS or Cambridge Exam are recommended of all candidates (both graduate and undergraduate).

Indicate the date on which you have taken or plan to take one of these tests: \_\_\_\_\_

Total Score (if known): \_\_\_\_\_

(Submit documentation with this application)

**Post-Secondary Education Information:**

Are you currently enrolled in a college or university: ( ) Yes ( ) No.

If yes, where? \_\_\_\_\_

(If applicable) List in a chronological order all colleges and universities you have attended:

			Date			Graduated		
			Entered	Departed				
Name of Institution	City	State	Mo/Yr	Mo/Yr	Degree	Major	Mo/Yr	

All applicants should submit an official transcript from each college or university attended to the AELI office.

Do you intend to seek admission to a degree program at Stephen F. Austin State University? \_\_\_\_\_

Expected Major \_\_\_\_\_ Degree Sought \_\_\_\_\_ (Bachelor, Master, Doctorate)

In case of emergency, notify:

Last name, First name \_\_\_\_\_, \_\_\_\_\_

Telephone number \_\_\_\_\_ Relationship \_\_\_\_\_

Address: \_\_\_\_\_  
 (Street/PO Box #) (City) (State) (Country) (Postal Code)

**Certification of Finances**

The Bureau of Citizenship and Immigration Services (BCIS) requires nonimmigrant international students to verify that they will have funds available to pay for their education, living, and other expenses. The BCIS will not permit an international student with a student visa to work off campus; international students may work on campus.

The following information is necessary in order for SFASU to issue you I-20 forms.

Will any dependents (spouse or children) join you in the U.S? Yes \_\_\_ No \_\_\_. If Yes, please provide list of details:

<u>Dependent Name:</u>						
Last (family – match passport)	First	Birthdate (Mo/Day/Yr)	Country of Birth	Country of Citizenship	Relationship	
_____	_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	_____	
_____	_____	_____	_____	_____	_____	

In completing this section, refer to estimated expense information given in the AELI brochure. Give amounts in U.S. dollars.

When estimating expenses, be sure to include expenses incurred by dependents.

Sources of Funds	Assured Support for first year
<b>Self-Support:</b> _____ Name of Bank _____ A bank official's signature is required on the certification below.	
<b>Parents or Individual Sponsors</b> _____ Name _____ _____ Name of Bank _____ Parents and/or sponsor's signature and a bank official's signature are required on the certification below.	
<b>Your Government or Other Sponsoring Agency</b> _____ Name of Agency _____ Enclose with this form a signed copy of your letter of award.	
<b>Other</b> (Specify) _____ Enclose with this form a signed affidavit from an authorized person to certify the accuracy of this entry.	
Each of these totals should equal the institution's estimate of expense for one year. <p style="text-align: center;"><b>TOTAL</b></p>	\$

**Official Certification of Sources of Funds and Amounts**

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available.

Signature of Bank Official: \_\_\_\_\_

Title: \_\_\_\_\_

Name of Bank: \_\_\_\_\_

Date: \_\_\_\_\_

This is to certify that I have read the information furnished by the applicant on this form, that it is a true and accurate statement, and that the funds are available and will be provided as indicated.

Signature of Guarantor (Parent or Sponsor): \_\_\_\_\_

Address: \_\_\_\_\_

Relationship of Guarantor to student: \_\_\_\_\_

Date: \_\_\_\_\_

I certify that the information provided here is correct and complete.

Signature of Student: \_\_\_\_\_ Date: \_\_\_\_\_