Dear International Student Prospect:

Thank you for your interest in Coastal Alabama Community College. Coastal Alabama has three campuses serving international students. These campuses are located in the semi-rural areas of Bay Minette, Fairhope, and Gulf Shores, Alabama. We enroll over 5,000 students on these three campuses. Currently, we have a small, but growing, population of International Students. The campus that has on-campus housing is located in Bay Minette, Alabama. The closest airports are Mobile, Alabama and Pensacola, Florida. There is no transportation for students provided by Coastal Alabama. Coastal Alabama offers short-term training certificates, long-term certificates, and associate degree (two-year) programs and, in total, has over 100 programs to offer students. You can also find a list of all of our programs plus other information by looking at our website: www.coastalalabama.edu.

If you are interested in enrolling in our school, you must fill out the enclosed International Student Application completely. Directions must be followed exactly. We need original signatures on all documents; therefore, no copies of documents will be accepted. International Student Applicants must provide all of the listed items to enroll as a Coastal Alabama student. In order for students to register for classes once they obtain their F-1 Visa Status, they must provide any additional documents requested.

International Student Applicants must provide a foreign address and contact information as well as a United States address and contact information. If the United States address and contact information is unknown during the application process, students must provide this information once they have entered the US and before they can register for classes. Students must register and maintain full-time hours each semester for a minimum of two consecutive semesters in order to maintain their F-1 Visa Status and to remain a Coastal Alabama student. Therefore, they must register for classes at the earliest date of registration before classes are closed. With the exception of coming from a country whose primary language is English, International Student Applicants must provide proof of proficiency of the English language by one of the means listed on the checklist included in this packet. It is the Applicant's responsibility to have the official TOEFL or IELTS transcript sent to Coastal Alabama.

A licensed physician must sign the Medical Form and complete the Personal Health History portion of the form. Immunization records must be complete and up to date. A Tuberculosis (TB) Skin Test is also required.

Financial Aid is not offered to International Students who attend Coastal Alabama. Applicants must have a financial sponsor sign the declaration form. The signature must be notarized. An official from the sponsor's bank must also sign the "Declaration by Sponsor's Bank" and have the Bank's Stamp or Seal to indicate authenticity.

Once Student Applicants are approved to enroll at Coastal Alabama and once they have registered for classes, they must pay for all school fees entirely by their own means. Coastal Alabama has no methods of credit for international students, including school credit cards. Students must have US. currency money available for all fees. An information sheet with estimated costs is included in this packet.

International Student Applicants must have their official transcripts sent to Coastal Alabama. Any academic transcripts from any country outside of the U.S. must be evaluated into U.S. semester hours. Additionally, transcripts that are not written in English must be translated into English. Evaluations and translations must be done by credible and acceptable organizations. A list of acceptable evaluation companies used by former
International Student Applicants is included with this packet. If students attended college in the U.S., they must have official transcripts sent from each college previously attended to Coastal Alabama. Also, a "Transfer Eligibility Form" must be completed by an official in the International Student Department of the U.S. college attended previously. Once the student has been accepted to Coastal Alabama and makes the decision to enroll, the student must request that the records be transferred in SEVIS from the previous college also.

After all of the items listed for enrollment have been completed as indicated, applicants must turn the paperwork in to the Designated International Student Official in the Office of Admissions or mail it to the address below. Once received, the application will be evaluated, and a decision made if the applicant will be allowed to enroll with Coastal Alabama. Student Applicants should expect a minimum of two weeks for processing paperwork and for a decision to be made. If a student is approved to enroll at Coastal Alabama, the DSO will issue the Student Applicant an I-20 form. The I-20 form is a legal document and will not be faxed. This form must be taken to a US Embassy or Consulate as part of the application process for a F-1 Visa.

Once Applicants receive F-1 Visas and enter the country, they must provide additional documents before they are allowed to register for classes. They must provide the American address and contact information, show their Passport, F-1 Visa, and I-94 that was stamped when they entered the U.S. They must also provide a receipt as proof that they paid for health insurance for one complete academic year. The dates must include the month when their first class starts and the last day of the month of the anticipated last class for the year. The receipt must also show coverage of Repatriation and Medical Evacuation. A list of health insurance companies former International Students have used is provided in this packet.

Should you have any questions after you have read over all the enclosed documents and looked at our website, please feel free to contact either Theresa McClelland (PDSO) or Austin Gilchrist (DSO). Again, thank you for your interest in Coastal Alabama Community College!

Sincerely,

Theresa McClelland
Principal Designated International Student Official
Theresa.McClelland@CoastalAlabama.edu
Phone # 251-580-2185
Fax # 251-580-2226
Coastal Alabama Community College
1900 US Hwy 31 South Bay Minette, AL 36507

Austin Gilchrist
Designated International Student Official
Austin.Gilchrist@CoastalAlabama.edu
Phone # 251-580-2263
Cell # 251-250-8674
Coastal Alabama Community College
1900 US Hwy 31 South Bay Minette, AL 36507
**COASTAL ALABAMA COMMUNITY COLLEGE INTERNATIONAL STUDENT (F-1 VISA) APPLICATION CHECKLIST**

Name _________________________

Assigned Number ____________________

First Term _________________________

CACC ID# ___________________________

SEVIS # ____________________________

Projected Program Completion ________________

---

International Students must provide the following documents for enrollment to Coastal Alabama:

1. _____ Coastal Alabama Application for International Students (Pages 4 - 5)
2. _____ A current photograph – passport sized, preferred (Attached to top of page 4)
3. _____ Affidavit of Financial Support (Page 6-7) must be notarized
4. _____ Declaration of Financial Support by Sponsor’s Bank (Page 7)
   a. _____ Sponsor’s bank statements for one year may serve as sufficient substituting evidence of financial support
5. _____ Completed Medical History Forms (Pages 8 – 9) must be signed by a physician
6. _____ Immunization Form must be completed and signed by authorized personnel (Page 10)
7. _____ English language competency as evidenced by at least one of the following:
   a. _____ A minimum score of 5.5 on the IELTS (International English Language Testing System)
   b. _____ Minimum score on the TOEFL (Test of English as a Foreign Language) of:
      i. 500 (Paper-based total) 173 (Computer-based total) 61 (New Internet-based)
   c. _____ A grade of C or above for ENG 101 from a Regionally Accredited College
   d. _____ Exemptions:
      i. The Student is from a predominantly English-speaking country. List here: _________________________
      ii. The student graduated from a high school in the United States. List here: _________________________
8. _____ Official Academic Transcripts. Note: Copies of transcripts are not accepted.
   a. _____ Official college transcripts from all colleges attended must be provided to Coastal Alabama. College transcripts from any country outside of the U.S. must be evaluated. Transcripts must include each course taken, the grade, and credit hours awarded. Any transcripts not written in English must be translated into English by a credible and acceptable organization. A copy of each original transcript must also be included. (A list of acceptable companies used by form Coastal Alabama students is attached.)
   b. _____ An official high school transcript must be provided to Coastal Alabama. The transcript must include the graduation date, the list of courses taken and grades for each year of high school. Any transcripts not written in English must be translated into English by a credible and acceptable organization. A copy of each original transcript must also be included. (A list of acceptable companies used by form Coastal Alabama students is attached.) Note: Students who have achieved a minimum of a Baccalaureate degree are only required to submit a transcript from the awarding institution.
   c. _____ GED (General Education Diploma)

Students who transfer from another college in the U.S. must provide the following additional documents:

1. _____ A completed Transfer Eligibility Form for F-1 Students
2. _____ Copy of current I-20

---

International Students must provide the following documents register for classes at Coastal Alabama:

1. _____ Proof of payment of I-901 SEVIS fee (copy of receipt)
2. _____ United States address; e-mail address; and phone number(s)
3. _____ Proof of health insurance paid for one year (coverage must include Repatriation and Medical Evacuation coverages)
4. _____ Copy of passport
5. _____ Copy of F-1 Visa

---

The following documents should be provided if the Student has in his/her possession:

1. Copy of Social Security Number and/or Driver’s License

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Revised 04/13/2020
INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

(Print clearly in ink)

1. When do you plan to enroll? (Check one and complete the year)
   a. ___ Fall (Aug.-Dec.) 20__  ___ Spring (Jan.-May) 20__  ___ Summer (May-Aug.) 20__

2. Name: __________________________________________
   Last Name / Family Name (as listed on your passport) First Name Middle Name


4. Date of Birth: ___/___/_________ (MM/DD/YYYY) Gender: _____ Male _____ Female

5. Marital Status: _____ Single _____ Married _____ Divorced _____ Widowed

6. Ethnic Origin: _____ Hawaiian or Pacific Islander _____ Asian _____ Native American _____ Hispanic/Latino
   _____ White _____ Two or more races

7. Address in your home country / foreign address: __________________________________________
   (Street number and street name)
   __________________________________________
   (City) (Province/Territory/State)
   __________________________________________
   (Country) (Postal Code)

8. U.S. Address: __________________________________________
   (Street number and street name)
   __________________________________________
   (City) (State) (Postal Code)

9. Telephone number: (Cell) __________________________________________ (Home)

10. E-mail address: __________________________________________

11. In an emergency, who should be notified?
    Name: __________________________________________ Relationship: _________________________________
    Complete Address: __________________________________________
    Telephone Number: (Cell) __________________________________________ (Home)

12. Indicate here the major that you wish to pursue at Coastal Alabama: _________________________________
    (Select one from the attached list of current majors)

13. If you are now in the United States, which type of visa do you have?
    _____ F-1 _____ J-1 _____ B-1 _____ Other: _________________________________ (Visa Type)
    _____ F-2 _____ J-2 _____ B-2

ATTACH RECENT PHOTO HERE (REQUIRED)
14. Indicate your English proficiency here by filling in the blanks that apply to you:
   a. IELTS score of ______
   b. TOEFL score of _____ (paper-based total); _____ (computer-based total); or _____ (new internet-based total)
   c. English Composition 101 course grade from a regionally accredited college of _____
      i. The name of the college where this course was taken ______________________________
   d. Graduated from a high school in the U.S. _____ Yes _____ No
   e. Native to a country whose prominent language is English _____ Yes _____ No
      i. The name of the country ______________________________________

15. Date of high school (secondary school) graduation OR equivalent: __________ (Month) __________ (Year)
   a. Name of high school: ______________________________________________________
   b. High school address: ______________________________________________________________________

16. Are you transferring from a college or university in the United States? _____ (Yes) _____ (No)
   a. Name of college/university: ______________________________________________________
   b. Address: ____________________________________________________________________________

17. List ALL U.S. colleges/universities attended and dates of attendance
<table>
<thead>
<tr>
<th>Name of School</th>
<th>Location of School</th>
<th>Years Attended</th>
<th>Certificate/Degree Awarded</th>
</tr>
</thead>
</table>

18. Have you previously applied to Coastal Alabama? _____ (Yes) _____ (No) If “Yes,” when? ____________ ____________
   (Month) (Year)

19. How did you first learn about Coastal Alabama Community College?
   ________________________________________________________________________________
   (Friend, family member, agency, publication, website, social media, other?)

20. Indicate your housing preference
   a. _____ On-campus housing
   b. _____ Off-campus housing

21. List some of your hobbies and interests ________________________________________________
______________________________________________

I understand that withholding information requested in this application, or giving false information, may make me ineligible for admission to, or continuation in, the College. I agree to abide by the rules, policies, and regulations of the College as outlined in the Student Handbook and College Catalog. With this in mind, I certify that all above statements are correct and complete.

APPLICANT'S SIGNATURE ______________________________ DATE ________________

Revised 04/13/2020
AFFIDAVIT OF FINANCIAL SUPPORT FOR ADMISSION TO COASTAL ALABAMA COMMUNITY COLLEGE

(Print clearly in ink)

NOTE: Colleges and Universities in the United States are required to have documentation of adequate financial support before they may legally admit an international student for study. Proper completion and submission of this form is required.

INSTRUCTIONS: Prospective student’s financial sponsor must complete this form. ALL requested information must be provided.

1. Student’s name:
   Last Name / Family Name (as listed on your passport)  First Name  Middle Name

2. Sponsor’s Name:
   Last Name / Family Name (as listed on your passport)  First Name  Middle Name

3. Mailing address of sponsor

   __________________________________________________________
   __________________________________________________________

4. Sponsor’s relationship to student ____________________________

5. Sponsor’s country of birth _________________________________

6. Sponsor’s country of citizenship _____________________________

7. Sponsor’s date of birth (MM/DD/YYYY) ____________________________

8. Sponsor’s employer of source(s) of income and net amounts (U.S. dollars) received per year from each source
   a. ____________________________________________  $_____________________ per year
   b. ____________________________________________  $_____________________ per year
   c. ____________________________________________  $_____________________ per year

9. Sponsor’s primary position or job title _________________________________

10. Name of any other dependents who are or will be studying in the U.S. _______________________________________________

11. Does your government require that you obtain their permission in order to transfer funds to the United States to financially support the prospective student listed on this form? _____ (Yes) _____ (No)

12. Coastal Alabama Community College does not consider students registered for classes unless the students pay ALL tuition and fees at registration. Semester sessions being in August, January, and May. Do you anticipate any difficulty in assuring that this prospective student will have sufficient funds in his/her possession at each registration period? _____ (Yes) _____ (No)

If “Yes,” please explain:

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Revised 04/13/2020
CERTIFICATION OF THE AFFIDAVIT OF FINANCIAL SUPPORT:

I, __________________________________________, financial guarantor for _______________________________________, certify that I will provide sufficient funds to pay for any and all educational and living expenses of the above-named prospective student, and I certify that the prospective student will not become a public charge during his/her stay in the United States of America.

I am aware that the official minimum estimate of the total annual cost for an international student attending Coastal Alabama Community College is (check one):

   $20,577.00 estimated U.S. cost for a single student living on-campus
   $20,892.00 estimated U.S. cost for a single student living off-campus

I further certify that all information provided on this affidavit is true and valid information.

SPONSOR’S SIGNATURE ___________________________________________ DATE ______________________

SPONSOR’S PRINTED NAME ___________________________________________

NOTARY SIGNATURE AND SEAL ___________________________________________ DATE ______________________

NOTARY PRINTED NAME ___________________________________________

DECLARATION OF FINANCIAL SUPPORT BY SPONSOR’S BANK:
(To be completed by a banking official)

Name of sponsor ___________________________________________ (Last Name / Family Name in CAPITAL LETTERS)

(First Name) (Middle Name)

This is to certify that, in view of our professional relationship with the above-named client, who has had an account and/or conducted other business transactions through this bank for _____ years, it is our conviction that he/she has sufficient financial means to provide at least the amount of money indicated in the top part of this page to the above-named prospective student for the purpose of study in the United States of America. Further, to the best of our knowledge, he/she should experience no difficulty in transferring the required funds from our county to the student in the United States.

Name of bank ___________________________________________

Address of bank ___________________________________________

PRINTED NAME OF BANK OFFICIAL ___________________________________________

SIGNATURE OF BANK OFFICIAL ___________________________________________ DATE ______________________
# Medical History Form

This portion is to be completed by the student.

**Name**

<table>
<thead>
<tr>
<th>Last</th>
<th>First</th>
<th>Middle</th>
<th>SS#/ID</th>
</tr>
</thead>
</table>

**Home Address**

<table>
<thead>
<tr>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Cell Phone</th>
<th>Date of Birth</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
</table>

**Emergency Contact**

<table>
<thead>
<tr>
<th>Phone</th>
<th>Relationship</th>
</tr>
</thead>
</table>

This medical data is necessary to serve as a baseline for medical clearance for actual enrollment. Details of abnormalities should be recorded. Please check YES or NO to the following conditions.

<table>
<thead>
<tr>
<th>CONDITIONS</th>
<th>NO</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hypertension</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rheumatic fever or heart trouble</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Liver trouble or jaundice (Hepatitis)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Asthma or tuberculosis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Major surgery or injury</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ulcers or gastroenteritis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Backache or joint trouble</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kidney trouble</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diabetes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Severe headaches</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Epilepsy or convulsions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dyspnea</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Drug or alcohol problem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has applicant been treated for any emotional disorders?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has applicant, because of his/her health, withdrawn from college? If so explain</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the applicant have any illness or medical condition that requires regular treatment?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Does the applicant miss school regularly or frequently due to any physical condition?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Has the applicant been hospitalized?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any family member with chronic illness, mental or nervous disorders?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anemia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Learning disability</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Comments:**

Present Health: _____ Good _____ Fair _____ Poor

Date of last exam: _____ / _____ / _____
This portion is to be completed by a Physician.

Height ________ Weight ________________ Skeletal Size: Small  ____ Medium  ____ Large  ____ EL  ____
B/P ________ Pulse ________________ Respiration __________________________ Temperature ____________

Laboratory Findings

Hemoglobin or Hematocrit ________________ WBC ________________ Serology ______________________
Urine: Sp.Gr ________________ Alb ________________ Sugar ________________

Eyes

Do you wear glasses?  No  Yes
Do you wear contacts?  No  Yes

Distant Vision  Without glasses  R20/
               With glasses  R20/
Near Vision  Without glasses  R20/
              With glasses  R20/

Ears

Hearing normal?  No  Yes
Are drums intact?  No  Yes

Head, Neck and Face  Normal ( )  Abnormal ( )
Nose and Sinuses  Normal ( )  Abnormal ( )
Mouth and Throat  Normal ( )  Abnormal ( )
Teeth  Normal ( )  Abnormal ( )
Lungs and Chest  Normal ( )  Abnormal ( )
Heart  Normal ( )  Abnormal ( )
Vascular System  Normal ( )  Abnormal ( )
Abdomen  Normal ( )  Abnormal ( )
Endocrine System  Normal ( )  Abnormal ( )
Female: Breast  Normal ( )  Abnormal ( )
Female: Pelvic  Normal ( )  Abnormal ( )
Male: Genital  Normal ( )  Abnormal ( )
Male: Hernia  Normal ( )  Abnormal ( )

Present Health:  ____ Good  ____ Fair  ____ Poor
Date of exam:  ____/____/____

I certify that the above information is true.

______________________________
Physician’s Signature

______________________________
Student’s Signature

TO BE COMPLETED BY COLLEGE OFFICIAL

Date Received: ___________________
Signature: ______________________

Complete and return to:
Immunization Form

To ensure the health and safety of our campus, immunizations against communicable disease is extremely important. Vaccination against Measles, Mumps, Rubella (MMR), Tetanus, and Meningococcal is required, as well as a negative Tuberculosis skin test. This is a requirement for all International Students. This form must be completed and submitted prior to admission in any ACCS institution.

<table>
<thead>
<tr>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Contact Number</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>/ /</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section A: Required Immunizations/Tests**

<table>
<thead>
<tr>
<th>Month/Day/Year</th>
<th>Month/Day/Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Meningitis Vaccine- within the last 5 years (Menomune, Menactra, Menevo)</td>
<td></td>
</tr>
<tr>
<td>2. Measles, Mumps, Rubella (MMR)</td>
<td></td>
</tr>
<tr>
<td>3. Tetanus</td>
<td></td>
</tr>
<tr>
<td>4. Tuberculosis Screening</td>
<td></td>
</tr>
<tr>
<td>TB Skin Test by PPD</td>
<td>Date Placed</td>
</tr>
<tr>
<td>Chest X-Ray (if positive PPD or lab)</td>
<td>Date</td>
</tr>
</tbody>
</table>

**Section B: Recommended Immunizations**

Please attach documentation of all childhood vaccinations (copy of Blue Card)

<table>
<thead>
<tr>
<th>Month/Day/Year</th>
<th>Month/Day/Year</th>
<th>Month/Day/Year</th>
<th>Titer Date &amp; Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>TD (Tetanus/Diphtheria)</td>
<td>Do not write here</td>
<td>Do not write here</td>
<td>Do not write here</td>
</tr>
<tr>
<td>AND/OR Tdap (Tetanus/Diphtheria)</td>
<td>Do not write here</td>
<td>Do not write here</td>
<td>Do not write here</td>
</tr>
<tr>
<td>Polio</td>
<td>Do not write here</td>
<td>Do not write here</td>
<td></td>
</tr>
<tr>
<td>Hepatitis B</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varicella (Chickenpox)</td>
<td></td>
<td>Do not write here</td>
<td></td>
</tr>
</tbody>
</table>

I certify that the above dates and vaccinations are true.

Signature of License Health Care Professional or Authorized Individual  Date

Complete and return to:
INTERNATIONAL STUDENT TRANSFER CLEARANCE FORM

The following information is required for F-1 visa holders in order to process admission and transfer to Coastal Alabama Community College. Please complete section A and submit this form to the International Student Advisor at your most recent U.S. college or university.

### SECTION I – TO BE COMPLETED BY THE STUDENT

<table>
<thead>
<tr>
<th>Student’s Name</th>
<th>Last Name / Family Name (as listed on your passport)</th>
<th>First Name</th>
<th>Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic semester and year you wish to begin your studies at CACC</td>
<td>____________________________________________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Choose the Coastal Alabama Campus you will attend:</td>
<td>_____ Bay Minette</td>
<td>_____ Fairhope</td>
<td>_____ Gulf Shores</td>
</tr>
<tr>
<td>I authorize my International Student Advisor (or alternate designated official) at the school where I am currently registered to provide the information below as part of my application for admissions to Coastal Alabama Community College.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Student Signature</td>
<td>____________________________________________________</td>
<td>Date</td>
<td>____________________________</td>
</tr>
<tr>
<td>Student Phone Number</td>
<td>________________________________</td>
<td>E-mail Address</td>
<td>________________________________</td>
</tr>
</tbody>
</table>

### SECTION II – TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR

The student named above has applied for admission to Coastal Alabama Community College. Your assistance is appreciated in completing this section below and returning this form with a copy of the student’s current I-20 to:

Coastal Alabama Community College; Office of Admissions; 1900 US-31 South; Bay Minette, AL 36507

<table>
<thead>
<tr>
<th>INS Admission (I-94) Number</th>
<th>Visa Type</th>
<th>____________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>SEVIS ID Number</td>
<td>SEVIS Release Date</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

Please Note: This form must be completed prior to issuance of the Coastal Alabama Admission Letter. Upon admission to Coastal Alabama Community College, please release the student’s SEVIS record to the campus indicated above in Section I.

Please mark ALL statements that apply:

- [ ] The student is in good standing and is/has been pursuing a full course of study.
- [ ] The student is out of status and a reinstatement to student status was filed on (date) ___________________ at the USCIS office in (place) _______________________ and is pending. (Please enclose copies of documents filed with USCIS.)
- [ ] The student is out of status
- [ ] The student is currently under practical training. Please list all periods of authorized practical training (curricular or option) if known. _______________________________________________________________________________________________

Signature of School Official ____________________________________________________________ Date ____________________________

Printed Name and Title of School Official ____________________________________________________

Institution __________________________________________________________ Telephone # ____________________________

Address ____________________________________________ (Street) ____________________________ (City) ____________________________ (State) ____________________________ (Postal Code) ____________________________

Coastal Alabama offers equal opportunity in its employment, admissions, educational programs and activities, and facilities access in compliance with Title VI and VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, Title IX of the Educational Amendment of 1972, and the Americans with Disabilities Act of 1990.
FOREIGN CREDENTIAL EVALUATION

In order to fulfill your requirements for enrollment at Coastal Alabama Community College, you must have your high school (secondary school) transcript with the graduation date sent to Coastal Alabama, unless you have a bachelor’s degree from a college or university. If you graduated from a college with a bachelor’s degree, you are only required to send the transcript from that college. If you attended college, but did not graduate with a bachelor’s degree, you are required to send us transcripts from your high school and from every college you have attended.

Every transcript must be evaluated course by course in United States semester hours. If your transcripts are not in English, they must be translated into English. You must provide an evaluation and translation for your high school transcript and for each of your college transcripts. You must include a copy of your original transcripts with your evaluation. Listed on this form are several suggested, acceptable evaluation organizations. You must have the official evaluations sent by the evaluating agency to the following address:

Coastal Alabama Community College
1900 US-31 South
Bay Minette, AL 26507
Attention: Office of Admissions

SUGGESTED FOREIGN CREDENTIAL EVALUATORS

1. World Education Services, Inc. (WES)
   PO Box 5087
   Bowling Green Station
   New York, NY 10274-5087
   Telephone: 212.966.6311

   International Education Associates
   Telephone: 305.271.1616
   Fax: 305.273.1984
   E-mail: info@jsilny.com
   Website: www.jsilny.com
PROOF OF HEALTH INSURANCE FOR INTERNATIONAL STUDENTS

International students at Coastal Alabama Community College will not be able to register for classes until they provide proof of health insurance for one academic year. In order to provide proof of insurance, students must provide a certificate of insurance showing the student’s name, the dates during which the student is covered under the policy (at the very least, coverage must extend the first day of the month in which classes begin until the last day of the last month in which classes end for the academic year), and a summary of coverages (MUST INCLUDE coverage for Repatriation and Medical Evacuation). Additionally, the student must provide a receipt. The receipt must include the student’s name and coverage of insurance. Proof of health insurance can be provided in person to the Office of Admissions, faxed to 251-580-2134, emailed to Theresa.McClelland@CoastalAlabama.edu or Austin.Gilchrist@CoastalAlabama.edu, or mailed to the following address:

Coastal Alabama Community College
1900 US-31 South
Bay Minette, AL 36507
Attention: Office of Admissions

NOTE: International students must provide proof of such stated coverage for each academic year in which they intend to enroll at Coastal Alabama Community College.

SUGGESTED HEALTH INSURANCE COMPANIES FOR INTERNATIONAL STUDENTS

1. HTH Worldwide Insurance Services
   1.888.350.2002
   https://www.hthtravelinsurance.com/students_plans.cfm

2. GeoBlue
   1.855.481.6647
   https://www.geobluestudents.com/

3. International Student Organization (ISO)
   250 West 49th Street Suite #806
   New York, NY 10019
   1.800.244.1180 or 212.262.8922
   www.isoa.org

4. Parker Waller Agency – Starr Insurance Group
   401 Cedar Street
   P.O. Box 249
   Greenville, AL 36037
   1.334.382.1234
   Contact: Sam Starr