

**ALL Enrollment Application Form**  
 Please answer all questions and type or print clearly.

To apply online visit:  
**COMPLETED**

Agents - Please fill in ALL blanks and address areas below	
Agency Name	SDST
Agency Code	7627
Agency Email	SanDiegoST@Gmail.com
Agency Phone	(760) 618-1150
Contact Name	Admin

**Student Information**

Last Name:	First Name:	Middle Name:
Date of Birth (Month/Day/Year):	Country of Birth:	Country of Citizenship:
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Student Email:	Phone:

**Student's Permanent Address in Home Country**

**Student/Agent Mailing Address (where I-20 will be mailed)**

Street Address:	Street Address: Overseas Chinese University
	No.100, Chiao-Kwang Road
City/Province:	City/Province: TAICHUNG CITY
Country:	Country: TAIWAN
Postal Code:	Postal Code: 40721
Name of current university or school last attended in home country:	Phone: 011-886-4-2701-6855 x 1507
Overseas Chinese University (OCU)	Contact Name: Jackal Huang

**Program Information**

Select	Program	Start Date (mm/dd/yy)	End Date (mm/dd/yy)	# of Weeks
	Intensive English for Communication (IEC) (select one): <input type="checkbox"/> Full Term <input type="checkbox"/> A Session only <input type="checkbox"/> B Session only <input type="checkbox"/> Flex Entry <input type="checkbox"/> Part-Time			
	Business English			
	English for Academic Purposes (EAP)			
	Pre-MBA/Graduate Business Program			
	Semester at SDSU General Courses			
	Semester at SDSU Business Courses			
	Semester at SDSU Summer Term (select one): <input type="checkbox"/> Full Term <input type="checkbox"/> A Session only <input type="checkbox"/> B Session only			
	Semester at SDSU Certificate Programs (select one): <input type="checkbox"/> Business Certificate <input type="checkbox"/> Hospitality, Tourism, and Recreational Management <input type="checkbox"/> Sustainable Tourism Management <input type="checkbox"/> Performing in Music <input type="checkbox"/> Perspectives in Music <input type="checkbox"/> Environmental Studies			
	Business for Global Practices (BGP) Certificate (select one): <input type="checkbox"/> Full Term <input type="checkbox"/> A Session only <input type="checkbox"/> B Session only			
	TESL/TEFL Certificate			
	TEFL Seminar (please attach proof of prior teaching experience)			

**Application Fee and Method of Payment**

Amount: \$175	<input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
Card Number:	Exp. Date:
<input type="checkbox"/> Credit Card	
<b>CONFIDENTIAL</b>	
Union Bank of California	ABA No. 12200436
6010 El Cajon Blvd., San Diego, California, 92115, U.S.A.	SDSU Foundation Account 0111-251006 Swift Code: BDFCU933

**I-20 Application/Affidavit of Financial Support**

To receive an I-20, you must complete this form and provide a financial statement from you or your sponsor, certifying that you have enough funds for tuition and living expenses while you are in the U.S. The amount of funds you need will depend on the cost of the program you want to take plus approximately \$1,000 per month for living expenses. In addition, if you are bringing dependents, you should estimate an additional \$500 per month for a spouse and \$250 per month for a child.

<b>Source of Funds</b>	<input type="checkbox"/> Self <input type="checkbox"/> Family <input type="checkbox"/> Other (please specify):	
<b>Affidavit of Financial Support</b>	If you checked "family" or "other" under Source of Funds, the person who is financially responsible for you must read and sign the statement below.	
	"I have read the information about the amount needed for tuition costs and living expenses for the period of study at the American Language Institute at San Diego State University. I certify that these funds are available and I accept full responsibility for these expenses. I fully understand that persons coming to the United States on F-1 student status are expected to study full-time and no student should expect to work to support their education."	
	Printed name of person financially responsible	
	Signature	Date
<b>Sponsor's Funds</b>	If you are sponsored by a company, agency, foundation or government agency, please attach a letter from that sponsor that specifies which costs the sponsor will pay.	
	Name of sponsoring company, agent, foundation or government agency:	

**Mailing Information**

We mail the first I-20 and/or other information via DHL Express for free. You must pay for any additional mailings via DHL Express. Prices vary by country.

**Family Members**

If you are bringing family members with you to the U.S., they will need to be included on your I-20. Please estimate an additional \$500 per month for a spouse and \$250 per month for a child.

<b>Last Name, First Name</b>	
<b>Date of Birth</b>	Month:                      Day:                      Year:
<b>Country of Birth</b>	
<b>Country of Citizenship</b>	
<b>Gender</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Relationship to You</b>	<input type="checkbox"/> Child <input type="checkbox"/> Spouse

<b>Last Name, First Name</b>	
<b>Date of Birth</b>	Month:                      Day:                      Year:
<b>Country of Birth</b>	
<b>Country of Citizenship</b>	
<b>Gender</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female
<b>Relationship to You</b>	<input type="checkbox"/> Child <input type="checkbox"/> Spouse

Attach an additional sheet if you have more family members to include on the I-20.

**Transfer Information**

<b>Have you ever attended the ALI before?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes
	If yes, when?
<b>Were (or are) you currently attending another school in the U.S.?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes
	School Name:

**Declaration**

I certify that I have read all the information regarding enrollment and I-20 processing, that I am at least 18 years old and the information I am providing in the application is true to the best of my knowledge.

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

**Directory Permission**

I agree to give ALI permission to include my name, program, and dates of attendance in a public directory database.  Yes  No

**Housing Needs**

Please send me housing information for:	<input type="checkbox"/> On-campus apartments: Piedra del Sol
<input type="checkbox"/> Dormitory: Tenochca Residence Hall or University Towers	<input type="checkbox"/> On-campus apartments: Villa Alvarado
<input type="checkbox"/> Homestay	<input type="checkbox"/> On-campus apartments: Fraternity Row
<input type="checkbox"/> Off-campus apartments	<input type="checkbox"/> I do not need housing

**Special Needs**

<input type="checkbox"/> Airport Pick-up (\$60 fee)	If you need special services to accommodate a physical, visual, or hearing disability, please describe:
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**More Information**

Please fill out the information below to allow us to process your application: Where did you hear about the American Language Institute (ALI)?		
<input type="checkbox"/> Past or present student at ALI	<input type="checkbox"/> Agent Agent's name:	<input type="checkbox"/> School counselor Please list school name:
<input type="checkbox"/> Travel/Education Fair	<input type="checkbox"/> Advertisement Please list where you saw the ad:	<input type="checkbox"/> U.S. family relative or friend
Internet <input type="checkbox"/> ALI Web site <input type="checkbox"/> Facebook <input type="checkbox"/> Google <input type="checkbox"/> Yahoo <input type="checkbox"/> Live <input type="checkbox"/> Baidu <input type="checkbox"/> Other (please specify):	<input type="checkbox"/> ALI Catalog <input type="checkbox"/> U.S. Embassy/Consulate	<input type="checkbox"/> Other (please specify):

## SDST VISA Application Information Sheet

1. Passport English / Chinese Name: \_\_\_\_\_/\_\_\_\_\_
2. Taiwan Passport Number / ID #: \_\_\_\_\_/\_\_\_\_\_
3. Your Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_
4. City where Passport was Issued: \_\_\_\_\_
5. Passport Issue Date \_\_\_\_\_ Expiration Date \_\_\_\_\_
6. Your Cell # \_\_\_\_\_ E-mail: \_\_\_\_\_
7. Home Phone and Address (Chinese) \_\_\_\_\_ /  
\_\_\_\_\_
8. Home Address, Zip code (English)  
\_\_\_\_\_
9. School Name, Phone, Address \_\_\_\_\_ / \_\_\_\_\_  
/ \_\_\_\_\_
10. Major \_\_\_\_\_
11. If you're Not a student, please name your work information:
12. Company Name / Job Title: \_\_\_\_\_ / \_\_\_\_\_
13. Company address and phone: \_\_\_\_\_
14. Mother's Chinese Name \_\_\_\_\_ English Name \_\_\_\_\_
15. Mother's Date of Birth: \_\_\_\_\_ Cell # \_\_\_\_\_
16. Fathers Chinese Name: \_\_\_\_\_ English Name \_\_\_\_\_
17. Fathers Date of Birth: \_\_\_\_\_ Cell # \_\_\_\_\_
18. Fathers E-mail: \_\_\_\_\_ Mothers E-mail \_\_\_\_\_
19. Fathe / Mother Occupation: \_\_\_\_\_ / \_\_\_\_\_
20. Have you ever been convicted of any felony and crimes ? \_\_\_\_\_ Yes/No.
21. Have you ever Traveled to US before ?. \_\_\_\_\_ Yes/No.
22. Have you travel to other countries? \_\_\_\_\_ Yes/No
23. If yes, list the country's names: \_\_\_\_\_
24. Need an English Bank Financial Statement
25. Your Digital Head Shot Photo (<256Kbyte)
26. An image Copy of Taiwan Passport
27. Scan 24-26 and email to [helloed@gmail.com](mailto:helloed@gmail.com)