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Application deadlines for international students:
**Fall** | 5:00 p.m. on June 15
**Spring** | 5:00 p.m. on November 15

AFFIRMATIVE ACTION STATEMENT
Cape Cod Community College is an affirmative action/equal opportunity employer and does not discriminate on the basis of race, color, national origin, sex, disability, religion, age, veteran status, genetic information, gender identity or sexual orientation in its programs and activities as required by Title IX of the Educational Amendments of 1972, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964 and other applicable statutes and College policies. Cape Cod Community College prohibits sexual harassment, including sexual violence. Inquiries or complaints regarding the Americans with Disabilities Act, the Rehabilitation Act and related statutes and regulations shall be directed to the College’s Affirmative Action Officer, at the number and address below. Inquiries or complaints concerning discrimination, harassment, retaliation or sexual violence shall be referred to the College’s Affirmative Action Officer and Title IX Coordinator, Associate Vice President, Human Resources, P. Paul Alexander, located in the Nickerson Administration Building, (508)362-2131 x4307, the Massachusetts Commission Against Discrimination, the Equal Employment Opportunities Commission or the United States Department of Education’s Office for Civil Rights.
# Estimated Budget for International Students

**Tuition, Fees (Academic Year)**

$13,380.00

Based on the legal requirement that international students must be full-time students with 12 credits in the fall and spring semesters.

*For a complete breakdown of costs, please visit [https://www.capecod.edu/tuition](https://www.capecod.edu/tuition)*

**Books and Supplies**

$2,500.00

**Living Expenses**

$15,735.00

Assumes you are sharing an apartment with other students and includes basic utilities, transportation, food and recreational allowance.

**If you have guaranteed free room and board by a sponsor, your sponsor must complete the Sworn Statement of Free Room and Board.**

**Health and Medical Insurance**

$3,045.00

All international students are required to participate in a comprehensive health insurance plan. It is a basic policy that covers you if you are sick or if you need emergency medical services. If you have health insurance from another source, you can waive this fee by showing proof.

**Estimated Total Cost**

$34,660.00

- If you have a spouse with and/or children, add $5,000 for each person.
- Cape Cod Community College requires students to purchase health insurance through the College. You will automatically be enrolled for this health insurance. DO NOT purchase a private health insurance plan in or outside the United States.

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*Cape Cod Community College Admissions Office*

2240 Iyannough Road
West Barnstable, MA 02668 774 330 4311
International Student Application Materials

International student applicants must submit all required application materials no later than 5:00pm on November 1, 2020 for spring entry and June 1, 2021 for fall entry. The following application materials must be submitted to the Admissions Office to be considered for admissions:

1. Completed Admission Application
2. Completed international student application (pg. 6)
3. Official secondary school transcript of courses and grades or the foreign equivalent.
4. All documents must be submitted as originals or certified copies.
5. If documents are not in English, a certified/notarized English translation must be submitted along with your documents.
6. You must submit an evaluation by an accredited evaluation agency. CCCC has used the following:
   a. The Center for Educational Documentation (CED) www.cedevaluations.com
   b. World Education Services (WES) https://www.wes.org/
7. If English is not your first language, you are required to provide proof of your English Proficiency:
   a. Official TOEFL scores sent directly from Educational Testing Service www.ets.org/toefl
      (CCCC code: 3289) Minimum scores: 68 (IBT), 520 (written), 190 (computer)
   b. Official IELTS scores
   c. If you are in the United States, you are not required to submit a TOEFL score, but you must submit an official US college, or university transcript showing evidence of successful completion of English Composition I.
8. Copy of your passport.
9. Copy of your current I-20, as well as any previous I-20s issued to you.
10. Copy of your current visa and I-94 card, as well as any extensions or previous changes of visa status since your last entry into the United States.
11. Notarized Affidavit of Financial Support Form showing sufficient funds in a bank account to cover the total educational and living expenses for one year. The amount must be a minimum or $34,660 US dollars.
   a. If you receive financial support from a Sponsor, a separate notarized Affidavit of Financial Support Form must be submitted stating that your Sponsor will be responsible for your educational and living expenses for the duration of your studies at Cape Cod Community College. Your sponsor’s official bank statement, dated within 6 months, must also be submitted.
12. Completed Physicians Immunization Verification Form. You are required to have the following vaccinations: Hepatitis B, Two doses of MMR, Varicella, Tdap, Meningococcal
13. If transferring from another institution to Cape Cod Community College, submit completed International Student Transfer Report.

*All deferred students must submit new and up-to-date documentation for numbers 7 and 8 (see above).
Your completed international student application packet (which includes all required materials above) must be sent to:

Cape Cod Community College Admissions Office
2240 Iyannough Road
West Barnstable, MA 02668
Acceptance Process

If accepted for admission to Cape Cod Community College, you will need to apply for a student visa with your home country. Once accepted, Cape Cod Community College will provide you with an I-20 form that indicates that you are eligible for a student visa.

To apply for your F-1 Visa:
2. Schedule an appointment with the U.S. Embassy.
3. Go to a United States Embassy or Consulate to apply for a student (F-1) visa.

Make sure you have all the required documentation for your visa interview, including your Affidavit of Support, your sponsor’s official financial statement, the I-20 and the acceptance letter from Cape Cod Community College, and your valid passport.

For more information on obtaining your student visa, review the Study in the States website: https://studyinthestates.dhs.gov/

For additional information and to find a Visa Advising Center near you to assist you, visit the EducationUSA website: https://educationusa.state.gov/

Application deadlines for international students:
- **Fall** June 15
- **Spring** November 15

Students outside the US

**Placement Testing:** All students are required to take a placement test in English and Mathematics upon entrance to 4Cs. with an F1 visa unless waived. If you are an F1 student currently in the U.S., we recommend that you apply and take a placement test as soon as possible to determine your eligibility to a degree program. For more information about placement test and waivers, please visit: https://www.capecod.edu/accuplacer/

**Due to the Covid-19 pandemic we are testing remotely using Zoom.**

Cape Cod Community College Admissions Office
2240 Iyannough Road
West Barnstable, MA 02668 Phone: 774 330 4311
FAX: 508 375 4089
EMAIL: admissions@capecod.edu
International Student Application for Admissions

Please refer to the Admissions Checklist for mailing instructions. Please use black or blue ink.

DATE OF APPLICATION: __________________________

Last Name/Family Name ___________________________ First Name ___________________________ Middle Name (If Any) ___________________________

Semester you plan to start at Cape Cod Community College  □ Fall (September) □ Spring (January)

Are you currently in the US? □ Yes   □ No

If you are in the US, list the type of visa stamped in your passport:  Visa Issue Date: ___________________________ Visa Expiration Date: ___________________________

I-94 Arrival Date: ___________________________ I-94 Expiration Date: ___________________________

List High School You Have Attended/Graduated:

Name Of High School ___________________________ Year Started _________ Year Graduated _________

List any colleges and/or post high school institutions you have attended:

Name of College ___________________________ State _____________ Country ___________________________

Name of College ___________________________ State _____________ Country ___________________________

Highest degree earned:

□ High School (or equivalent) □ Associates degree □ Bachelor’s degree

Please check one:

□ First time enrolling at any college for credit □ Transfer from another college or university R

□ Returning to CCCC from an absence, non-graduate? □ Yes □ No

□ Are you requesting transfer credit? □ Yes □ No

To which Associate Degree program are you applying? ___________________________

Do you plan to transfer to a four-year college? Yes □ No □

I certify that all information stated on this application is accurate and complete.

Student’s signature ___________________________ Date ___________________________
I-20 Application Form

Please refer to the Admissions Checklist for mailing instructions. Please use black or blue ink.

Please also include a copy of your passport, and birth certificate or marriage certificate (required for dependents) with this form. A current bank statement, providing evidence of a minimum or USD $34,660 per year to support your study must be attached to the Affidavit of Support Form. The I-20 form will only be issued after the International Student Services Office has received all required documents. If you have dependents who will apply for F-2 visas, please provide their names, date of birth, and relationship to you on a separate sheet. An additional USD $5,000 per year per dependent must be included in your bank statement.

Date Of Application: ____________________ Date Of Birth: ____________________
Month/Day/Year Month/Day/Year

Last Name/Family Name First Name Middle Name (If Any)

Home Country Address (Required) United States Address (If Any)

Street Apartment # Street Apartment #

City/State/Country/Postal Code City/State/Country/Postal Code

Telephone

Email Address

Gender: □ Female □ Male

Student’s Date Of Birth: ____________________

Country Of Citizenship Country Of Birth

Where should we send the I-20? □ Home Country □ US Address □ Will Pick Up

Semester You Plan To Start At Cape Cod Community College: □ Fall (September) □ Spring (January)

Associate Degree Program Of Study

Students Currently In The U.s. Must Answer The Following Questions:

If You Currently Hold A Visa To Be In The Us, What Type Of Visa Do You Hold? ____________________

Expiration Date Of Visa? ____________________
<table>
<thead>
<tr>
<th>NAME (PLEASE PRINT):</th>
<th>STUDENT ID#  (Office Use Only)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>LAST NAME/FAMILY NAME</th>
<th>FIRST NAME</th>
<th>MIDDLE NAME (if any)</th>
</tr>
</thead>
</table>

**EMERGENCY CONTACT**

- In your home country
- In the United States

<table>
<thead>
<tr>
<th>NAME</th>
<th>NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>STREET</td>
<td>STREET</td>
</tr>
<tr>
<td>APARTMENT #</td>
<td>APARTMENT #</td>
</tr>
<tr>
<td>CITY/STATE/COUNTRY/POSTAL CODE</td>
<td>CITY/STATE/COUNTRY/POSTAL CODE</td>
</tr>
<tr>
<td>TELEPHONE</td>
<td>TELEPHONE</td>
</tr>
<tr>
<td>MOBILE PHONE</td>
<td>MOBILE PHONE</td>
</tr>
<tr>
<td>EMAIL ADDRESS</td>
<td>EMAIL ADDRESS</td>
</tr>
</tbody>
</table>

**HOME COUNTRY ADDRESS:**

<table>
<thead>
<tr>
<th>STREET ADDRESS</th>
<th>APARTMENT #</th>
<th>CITY</th>
<th>STATE</th>
<th>COUNTRY</th>
<th>POSTAL CODE</th>
</tr>
</thead>
</table>

Do you have an immigration situation we should be aware of?  [ ] Yes  [ ] No

If yes, please explain:  
________________________________________________________________________

________________________________________________________________________

Do you have any medical conditions we should be aware of?  [ ] Yes  [ ] No

If yes, please explain:  
________________________________________________________________________

________________________________________________________________________
Affidavit of Financial Support Form

Please refer to the Admissions Checklist for mailing instructions. International students or their sponsors must provide evidence of sufficient funds available to financially support two semesters of study at Cape Cod Community College. This affidavit must be signed by the sponsor, authorized by a bank official or individual authorized to certify documents and stamped or sealed by a notary public (not the bank official/authorizing individual). An original letter with an official signature on bank letterhead must also be submitted. The letter should verify a current account balance with a minimum of $34,660 (USD) and indicate whether the account is in good standing.

PLEASE PRINT

I, ____________________________ who reside at ________________________________

Name                        Address

Being duly sworn, depose and say that it is my intent to support ____________________________

Student name

In the amount of $ ____________________________

(USD, United States dollar)

who resides at ________________________________

Student address (home country)

and comes to the United States to study at Cape Cod Community College and resides at______________________________

(Student’s U.S. address, if known)

I have enclosed proof of this funding in the form of an original statement letter from a bank, dated within the past six months, showing funds in USD. I further certify that these funds are readily accessible for use in the United States.

Sponsor’s signature ____________________________ Date: ____________________________

Please note that Cape Cod Community College requires an original bank statement letter from a bank. If you need to retain an original copy, please request multiple original copies from your bank or sponsor.

Signature and statement signed and sworn before me ____________________________

Signature of Notary Public, bank official ____________________________

Address, location ____________________________

Date ____________________________
Affidavit of Free Room and Board Form: YEAR ONE

International students or their sponsors must provide evidence of sufficient funds available to financially support two semesters of study at Cape Cod Community College. They must submit this Affidavit for each year of study. This affidavit must be signed by the sponsor, authorized by a bank official or individual authorized to certify documents and stamped or sealed by a notary public (not the bank official/authorizing individual). An original letter with an official signature on bank letterhead must also be submitted. The letter should verify a current account balance with a minimum of $34,660 (USD) and indicate whether the account is in good standing.

PLEASE PRINT

I, ___________________________________________ promise that ___________________________________________

Sponsor Name                                                                                       Student Name

and ___________________________________________ will live free of any charge with me in my home for every year of study that

Dependent’s Name                                                                                      he/she attends Cape Cod Community College.

Home Address

______________________________________________________________________________________________

City            State  Zip Code

Home Phone        Mobile Phone

______________________________________________________________________________________________

Email :

______________________________________________________________________________________________

Relationship to Student: Parent/Spouse/Relative/Friend

☐ I understand this is a legal document. By signing and notarizing this paper, I am liable for providing this

student with a place to live free of charge for every year of her/his study. I will not require any type of

service for this benefit.

_____ 1. A copy of my rent agreement or rent receipt   OR

_____ 2. A copy of the deed of ownership to my residence or property tax bill.

I swear that the information I have provided above it true and correct.

Signature of Sponsor_________________________________________ Sworn and subscribed before me on this day ________

Signature of Notary ______________________________________
Affidavit of Free Room and Board Form: YEAR TWO

International students or their sponsors must provide evidence of sufficient funds available to financially support two semesters of study at Cape Cod Community College. They must submit this Affidavit for each year of study. This affidavit must be signed by the sponsor, authorized by a bank official or individual authorized to certify documents and stamped or sealed by a notary public (not the bank official/authorizing individual). An original letter with an official signature on bank letterhead must also be submitted. The letter should verify a current account balance with a minimum of $34,660 (USD) and indicate whether the account is in good standing.

PLEASE PRINT

I, __________________________________________ promise that __________________________________________

Sponsor Name                                                                                       Student Name

and ___________________________________________________________________ will live free of any charge with me in my home for every year of study that

Dependent’s Name

he/she attends Cape Cod Community College.

Home Address

City            State  Zip Code

Home Phone         Mobile Phone

Email :

Relationship to Student: Parent/Spouse/Relative/Friend

☐ I understand this is a legal document. By signing and notarizing this paper, I am liable for providing this student with a place to live free of charge for every year of her/his study. I will not require any type of service for this benefit.

_____  1. A copy of my rent agreement or rent receipt   OR
_____  2. A copy of the deed of ownership to my residence or property tax bill.

I swear that the information I have provided above it true and correct.

Signature of Sponsor__________________________ Sworn and subscribed before me on this day ________

Signature of Notary ________________________________
Maintaining Your F-1 Status

F-1 student, you have been admitted to the United States for “Duration of Status.” You are permitted to stay in the United States as long as you maintain your F-1 status by fulfilling the requirements of being an F-1 student. If you won’t comply with the rules outlined below, you will lose F-1 status.

U.S. Citizenship and Immigration Services (USCIS) requires that you must follow the regulations listed below in order to maintain your student status:

• Enroll and maintain a minimum of 12 credits every Fall and Spring semester. F-1 students may enroll only for one distant learning class per semester. (This is currently suspended by DHS/USCIS due to the COVID-19 pandemic.) If you fall below 12 credits, you will lose your F-1 status and must apply for reinstatement or leave the United States immediately.
• You may withdraw from a class, only after you obtain an written approval from the Designated School Official (DSO), the Dean of Enrollment Management and your Advisor.
• Maintain satisfactory progress (overall GPA of C or better) towards completing the course of study.
• Report any changes of address, program of study, sponsorship, or name change to the DSO within ten business days.
• Maintain a valid passport at all times.
• Work only on campus.
• Apply for a program extension if you cannot complete your degree by the ending date listed on your SEVIS I-20. You must apply for the extension 45 days before the expiration date.

☐ I certify that I have read the above statements about maintaining my F-1 status in the United States. I realize that it is my responsibility to understand and follow regulations pertaining to my legal rights.

________________________________________
Student Signature

________________________________________
Student Name (please print)

________________________________________
Student ID number

________________________________________
Date
Transfer Report

Please read this form carefully and sign in the space provided. Then give it to your International Student Advisor at the institution you are currently attending or last attended. The International Student Services Office must receive this form before an I-20 can be issued.

I, ________________________________, grant permission for the information on this form to be released to Cape Cod Community College.

Student name ____________________________ Date of Birth ____________________________

This section is for the International Student Advisor at the institution you are currently attending or last attended. Please note that Cape Cod Community College will not accept completed or terminated records. Please scan this completed document and email to: admissions@capecod.edu

I would like my student records to be transferred to:
Cape Cod Community College
2240 Iyannough Road
West Barnstable, MA 02668

SEVIS campus code BOS214F00607000

Date of most recent enrollment: ____________________________

Is the student eligible to continue at your institution?  □ YES  □ NO

To your knowledge, has the student met all obligations to the Department of Homeland Security?  □ YES  □ NO

To your knowledge, has the student met all financial obligations to your institution?  □ YES  □ NO

SEVIS ID number ____________________________________________

SEVIS Transfer Release Date: ____________________________

International student advisor’s nameTitle ____________________________________________

Name of Institution ____________________________________________

Mailing Address ____________________________________________

Email AddressTelephone Number ____________________________________________

Signature ____________________________ Date ____________________________

Additional Comments: ____________________________________________