

# LOS MEDANOS COLLEGE

Admissions and Records

## INTERNATIONAL STUDENT ADMISSIONS APPLICATION

Los Medanos College is located in Pittsburg, California, and is part of the Contra Costa Community College District which is comprised of three two-year public community colleges in the San Francisco Bay Area. The sister colleges are Contra Costa College in San Pablo and Diablo Valley College in Pleasant Hill. Los Medanos College offers a comprehensive transfer program for students who wish to pursue baccalaureate degrees, associate degrees, and certificates of achievement in courses for continuing professional education and technical education programs for job skills training.

### Admission Deadlines:

Fall Semester (August – December) July 1

Spring Semester (January – May) December 1

Please read the instructions for admission carefully and complete all the necessary documents. On page 5 of this application, you will find a checklist to help you complete this application. Please be sure to sign your name in all the required places. Your application will be considered complete only when we have received all the official documents.

Send the completed application materials to the following address:

Los Medanos College  
International Student Admissions  
2700 E. Leland Road  
Pittsburg, CA 94565  
USA

If you are interested in additional information on immigration, application status and admission to the college, please contact 925-473-7500; FAX 925-427-6351

Susie Hansen  
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## Admission Requirements

**English Language Ability:** Students must have a certain level of English proficiency to succeed at Los Medanos College. This requirement can be met by submitting a TOEFL score report with a minimum score of 54 on the internet based TOEFL (IBT); 157 on the computerized TOEFL; or 480 on the paper-based TOEFL.

**Fees:** Tuition and enrollment fees may be paid at the time of registration or throughout the semester. However, all current semester fees must be paid prior to registering for the next term. International student tuition for the 2014-2015 academic year is **\$269** per unit. Tuition is subject to change. There is also a \$1 per unit student union fee, assessed to a maximum of \$10 per academic year and a student activity fee of \$5 per semester. As indicated in the explanation of costs on the **Financial Certification** form (**page 5**), students must verify that they have at least **\$22,592 per academic year** available to them. The bank statement must show this **actual** amount (or more) in US dollars.

**Transcripts:** To qualify for admission, students must have graduated from high school (or have attained a high school graduation equivalency) or be at least 18 years of age by the beginning of the entering semester. Official transcripts from high school are **REQUIRED** from applicants who are not 18 years of age at the beginning of the term. Submission of high school and college transcripts is **REQUIRED** for all students for possible academic requirement completion.

**Health Certification:** Applicants must complete the **Health Statement (page 6)** enclosed in this application packet which verifies that they are in good health and have taken a tuberculosis test or show evidence that they are free of tuberculosis. This form must be certified by your doctor or health professional.

**Health Insurance:** Students medical insurance fees are included in the tuition costs. The fees for medical insurance **must** be paid by the end of the second week of each semester.

**Housing:** The college does not have dormitory facilities and most students arrange their own housing. Information on the home stay program can be found at [www.diablovalleyhomestay.com](http://www.diablovalleyhomestay.com)

**Notification of Acceptance:** Acceptance letters will be issued beginning May 15<sup>th</sup> for fall semester and October 15<sup>th</sup> for spring semester. The acceptance letter and I-20 will not be issued until the application for admission is complete. Please complete the **Application Checklist (page 8)**, indicating all completed documents have been sent and the date when incomplete or missing information will be provided.

**Orientation and Advising:** Upon acceptance, you will be provided information to begin your studies. This will include information on new student orientation, assessment testing, and education planning, F-1 check-in sessions, and registration. This important information will be provided to you via email.

**Mandatory In-Person Orientation:** Information regarding the International Student Orientation will be sent to you prior to your arrival in the United States. We will spend a full day completing the International Student Orientation, which will include assessment, education planning and registration for your first semester's classes.

## International Student Application

Indicate Semester Start Date:

Fall Semester 20\_\_\_\_

Spring Semester 20\_\_\_\_

Name: \_\_\_\_\_  
*Last (Family) name*                      *First (Given) name*                      *Middle name*

Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Sex:  Male  Female  
*Month*                      *Day*                      *Year*

Home Country Address: (Required – please print clearly)

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

City: \_\_\_\_\_      State/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_      Country: \_\_\_\_\_

Mailing Address for LMC I-20 (please print clearly):

\_\_\_ I wish to have my LMC I-20 mailed to me by express mail at the address listed below. If choosing this option, a \$50 non-refundable express mail fee must be included with this application. Payment may be made by check, money order or credit card (VISA or Master Card only).

\_\_\_ I wish to have my LMC I-20 mailed by regular US mail to the address listed below:

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

City: \_\_\_\_\_      State/Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_      Country: \_\_\_\_\_

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

Country Issuing Passport: \_\_\_\_\_

Telephone in Home Country: \_\_\_\_\_ (required for express mail)

Student's email (required): \_\_\_\_\_

US Address (if known)

US Address (if known)      \_\_\_\_\_  
*Street*                      *City*                      *State*                      *Zip*  
US Phone Number \_\_\_\_\_      FAX \_\_\_\_\_

Emergency Contact

• Name: \_\_\_\_\_      Relationship: \_\_\_\_\_

• Phone: \_\_\_\_\_

Major Field of Study: \_\_\_\_\_  
 Please choose the major that you entered on your LMC application

- Course Objective:  Transfer to 4-year university or college with Associate Degree  
 Transfer to 4-year university or college without Associate Degree  
 Complete Associate Degree only  
 Complete Certificate of Achievement

**Educational Background:** List the high school, college/university and/or language school you have attended:

School/College Attended	City/Country	Month/Year (from-to)	Diploma/Degree

Official high school transcripts documenting high school completion are required if you are under 18 years of age.

**English Proficiency:** You are required to provide a TOEFL score report to complete your application

Have you taken the TOEFL test?  Yes  No  
 If yes, when? \_\_\_\_\_ What is your score? \_\_\_\_\_  
 (month/year)

Are you currently studying in the United States?  Yes  No

Do you need to apply for Homestay?  Yes  No

Certification: "***I certify that all statements on this form are true and complete to my best knowledge.***"

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**F-1 STUDENT CONDITIONS AGREEMENT**

You must read and sign this section

As an F-1 visa student at LMC, I understand that I must fulfill the following conditions:

- Upon arrival, attend a mandatory F1 check-in session/orientation scheduled for international students.
- Be enrolled in a minimum of 12 units and complete a minimum of 12 units each semester with a cumulative grade point average of 2.0 or better.
- Have sufficient scholastic preparation and English proficiency to successfully participate in all coursework.
- Health insurance is mandatory and is included in your tuition fees each semester. This fee must be paid for within the first two weeks of school.
- Pay international tuition and enrollment fees at the current rates each semester and pay a one-time \$50 processing fee.
- Have sufficient funds to cover personal expenses and living arrangements.
- Update my address and phone number with the International Admissions Office any time I move.
- Be responsible for knowing and abiding by all other policies and regulations governing Contra Costa Community College District students at the college.

I have read each item on this form and understand my responsibilities.

\_\_\_\_\_  
 Applicant's signature

\_\_\_\_\_  
 Date

**International Student Financial Certification**  
 (Please indicate all financial amounts in US dollars)

The Department of Homeland Security requires you to certify that you will have the funds necessary for your own expenses at LMC, exclusive of travel expenses. Students who plan to stay in the United States through the summer will need additional funds for the three-month period. Please indicate the student's name when submitting bank statements, especially when the statement is in the sponsor's name.

In computing your expenses, you should keep in mind that international students (F-1 status/visa) are **not** allowed to work except in special circumstances, which must be authorized by the US Immigration Service. The amount of funds required for the academic year of 2015-2016 is approximately **\$22,592** (see information below) based on a course load of 12 units (the minimum required for F-1 visa students).

**Certification by Student:**

I, \_\_\_\_\_, certify that the total amount of money that I have available for each year of  
*(please print student's name)*  
 study at Los Medanos College is United States currency \$\_\_\_\_\_.

I plan to obtain money to pay expenses while studying in the United States from the following source(s):

- |  |   |
|--|---|
| <input type="checkbox"/> Personal Savings<br><input type="checkbox"/> Parent(s) (name) _____<br><input type="checkbox"/> US Sponsor (name) _____ | <input type="checkbox"/> Scholarship (describe source) _____<br><input type="checkbox"/> Other (please explain) _____ |
|--|---|

Self-Supporting Students	Supported Students
If the applicant is responsible for his or her own financial obligation, please sign below. In addition, you must provide an original certified bank statement	If your parent or sponsor is responsible for all or part of the financial obligation, please fill in the information below with the sponsor's signature. Include sponsor's original bank certification showing at least the minimum required in USD.
	Sponsor's name: _____
	Relationship to student: _____
	Sponsor's address: _____
	_____
Your Signature _____ Date _____	Sponsor's signature _____ Date _____

**Financial Requirements:** The estimated costs for the 2014-2015 academic year are as follows:

- \$ 6,486.....Tuition and Enrollment Fees (based on 12 units per semester)
- \$ 9,080.....Food and Housing
- \$ 1,750.....Books and Other Educational Expenses
- \$ 1,280.....Transportation
- \$ 996.....Health Insurance
- \$ 3,000.....Miscellaneous and Personal Expenses
- \$22,592.....Approximate Cost for the Academic Year**

**Health Statement**  
**Must be filled out by a doctor or health practitioner**

Student's Name: \_\_\_\_\_

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

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

Date of latest TB skin test (should be recent): Result of TB skin test: <input type="checkbox"/> Positive <input type="checkbox"/> Negative
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To Physician: Please comment on general physical condition of student applicant. Explain any condition that may affect travel or living in the United States. **If the TB test is positive, please explain the results of follow-up chest X-ray and patient's condition and treatment.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Physician's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Physician's Printed Name

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Please affix Physician's official seal  
or stamp above



Please use this checklist to make sure that you have completed all forms and information required in order to process your application. Please check all of the completed materials that you are including in your application. If any information is not included or incomplete, please indicate when you will provide it. **Only complete applications will be considered.** Letters of acceptance will be sent after the complete admissions application is received and evaluated. If you have any questions concerning this application or other information, please contact the international student admissions representative at the email address listed on the front of this application.

Name: \_\_\_\_\_

<input type="checkbox"/> \$50 non-refundable <b>application fee</b> (Check, money order or VISA/Master Card – see below)	Must be included with application
<input type="checkbox"/> I would like the LMC I-20 to be mailed by express mail. A non-refundable \$50 <b>express mail fee</b> will be charged to the credit card listed below, unless I have included a check or money order for this fee.  <input type="checkbox"/> I would like the LMC I-20 to be mailed by regular US mail.	If this option is chosen, payment must be included with application.  There is no charge for this option

To pay the non-refundable \$50 **application fee AND/OR** the non-refundable **express mail fee** by credit card, please fill out the credit card information below. Please write very clearly and sign at the bottom of the page.

MasterCard  
 VISA

Credit card number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration date: \_\_\_\_/\_\_\_\_

Name on credit card: \_\_\_\_\_  
(Please print)

<input type="checkbox"/> Completed Application form	
<input type="checkbox"/> Student's personal email address is required	
<input type="checkbox"/> TOEFL score report	If TOEFL report is not included, please indicate date to be sent to LMC:
<input type="checkbox"/> Signed F-1 Student Conditions Agreement (Page 4)	
<input type="checkbox"/> Official transcripts (page 2) - Required for all students under 18	
<input type="checkbox"/> Financial Certification/Bank Statement	
<input type="checkbox"/> Health Statement	
<input type="checkbox"/> Personal Essay	
<input type="checkbox"/> Photocopy of passport ID page (if available)	
<b>For Transfer Students:</b> <input type="checkbox"/> SEVIS Number – Include copy of I-20 from current US school <input type="checkbox"/> Photocopy of Visa	

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date