

Section 1: Personal Information *(Please print or type all information)*

Full Name: _____ **Date of Birth:** _____ / _____ / _____
Last (Family) First Middle Month Day Year

Sex: Male Female **Country of birth:** _____ **Country of citizenship:** _____ **Native language:** _____

Contact Information:
Telephone: _____ **Fax:** _____ **Email:** _____

Permanent Foreign Address:

Number/Street City State Country Postal Code

Local U.S. Address in Miami:

Number/Street City State Zip Code

Section 2: Visa Information

Do you presently have a United States Visa? Yes No **If yes, what type?** _____

Are you a transfer student currently in the United States with an I-20? Yes No
 If yes, what school issued your I-20? _____

Are you a United States permanent resident? Yes No


Are you a United States citizen? Yes No **Have you applied to the University of Miami?** Yes No

How did you learn about our English program? Former student Name: _____
 IEP representative/agent Name: _____
 Internet Search engine/portal/site: _____

Section 3: Which session do you plan to attend?

14-week sessions	6-week sessions
August 27 - December 5, 2008	October 9 - December 5, 2008
January 14 - May 1, 2009	February 26 - May 1, 2009
May 13 - August 14, 2009	June 25 - August 14, 2009

Section 4: What to send to apply for admission

1. Completed application
2. Nonrefundable/nontransferable application fee of U.S. \$100
3. Passport-sized photograph for applicant and dependent
4. Passport I.D. page for applicant and dependent
5. Original bank verification letter and/or scholarship letter 

Mail to:
 University of Miami
 Intensive English
 Program
 111 Allen Hall
 5050 Brunson Drive
 Coral Gables, Florida
 33146-1612 USA

Questions:
 E-mail: iep@miami.edu
 Phone: 305-284-2752
 Web: www.miami.edu/iep

Section 5: Statement of Financial Eligibility

Fill out this section only if you are requesting a SEVIS form I-20. All students requesting an I-20 must demonstrate evidence of financial support for their stay in the U.S.

Financial declaration: Approximate cost of one 14-week session at the University of Miami Intensive English Program is \$13,550.00. The approximate cost for the 6-week session is \$7,600.00. This cost includes tuition, fees, books, accommodations, meals on campus, and personal expenses. **An additional \$4,400.00 per session is required for each dependent included on the Form I-20.**

Indicate the person or organization responsible for your expenses during your stay at the University of Miami Intensive English Program

Myself Please attach an original bank letter with the amount indicated in U.S. dollars
Parents Please attach an original bank letter with the amount indicated in U.S. dollars
Sponsor Please attach an original scholarship or sponsor letter in English

Name and address of person or organization responsible for the payment of your expenses

Last (Family) Name First Name Address

City Country Postal Code Telephone Fax

Do you want to include your spouse and/or children on the SEVIS Form I-20? Yes No
If yes, please provide the following information and submit a copy of passport I.D. page for each person
(Attach additional sheets if necessary):

Name: _____ Relationship: _____
Date of Birth: ____ / ____ / ____ Country of citizenship: _____ Country of birth: _____

Section 6: Application Fee

(Before signing this form please read the following carefully and check the boxes next to the statements)

1. Enclosed is my international money order or check drawn on a U.S. bank for US\$100 payable to the University of Miami. I understand that this application fee is nonrefundable and nontransferable.
2. All information contained in my application is complete, factually correct, and honestly presented.
3. If I enroll in the IEP, I agree to follow the University of Miami Honor Code, a document that prohibits dishonesty in all academic work.
4. I understand that application for admission to the Intensive English Program does not constitute or guarantee admission to any University of Miami degree program.

Section 7: Signatures

I certify that the statements on this form are complete and accurate. My signature below indicates that I am registering for this course and that responsible for full payment of all the costs for the IEP program.

Signature of applicant Date Signature of sponsor Date

ATTACH
YOUR
PHOTO
HERE

An Equal Opportunity/Affirmative Action University

OFFICE USE ONLY

Session: _____

I.D. #: _____

Application fee: _____

FT:

PT: