

International Student Services

70 Sip Avenue, 1st Floor

Jersey City, New Jersey 07306

(201) 360-4136 or 4128 Fax: (201) 714-2136

Email: internationalstudents@hccc.edu

sbullock@hccc.edu



INTERNATIONAL STUDENT APPLICATION

Dear Prospective International Student:

Thank you for your interest in Hudson County Community College. We have enclosed information related to our college as well as conditions regarding the issuing of your Form I-20. Please read all instructions carefully and provide all requested information to the best of your ability. Please refer to the table below for application deadlines. *These dates are strictly enforced.* All documents should be returned to **Hudson County Community College, International Student Services, 70 Sip Avenue, Jersey City, NJ 07306**

<i>DEADLINES TO APPLY FOR ADMISSION:</i>		
<i>FOR</i>	<i>APPLYING FOR SEMESTER</i>	<i>DATE</i>
<i>Students outside of the U.S. or Applying for a Change of Status</i>	<i>Fall (Classes begin in September)</i>	June 1
<i>F-1 Visa Transfer students only</i>	<i>Fall</i>	July 1
<i>Students outside of the U.S. or Applying for a Change of Status</i>	<i>Spring (Classes begin in January)</i>	October 1
<i>F-1 Visa Transfer students only</i>	<i>Spring</i>	November 1
<i>Note: Acceptance is only issued for the Spring and Fall semester</i>		

GETTING YOUR FORM I-20:

You will need a Form I-20 in order to obtain an F-1 student visa. A Form I-20 is a government document that tells the US government that you are eligible for an F-1 visa. This document certifies that (1) you are or expected to be a “bona fide” student whose sole purpose of coming to the US is to study; (2) you have met all of HCCC’s admission requirements; (3) you will pursue a full course of study as a matriculated student; (4) you proved that you have enough money to study and live in the US without working illegally or suffering from poverty.

If you are outside of the US and coming to study, you must obtain an F-1 student visa. B-1/B-2 visa holders are prohibited by law from pursuing any course of study. If you are an F-2 visa holder you don’t necessarily have to change your status, however you are only allowed to enroll as a (**part-time student**). Please note that if you are another nonimmigrant status, you may be allowed to study full or part time and do not need a form I-20 as long as your dependent is maintaining their current status.

HCCC does not assist individuals with the Change of Status process.

FINANCIAL REQUIREMENTS AND SUPPORT:

Financial requirements and support are determined by the major that you have chosen. Please contact us for a updated financial requirements for an estimated of the cost of attendance which includes (tuition, fees, cost of living, transportation, food, etc.) based on 9 months of full time attendance in most degree programs. Unless you are pursuing a Nursing major, summer registration is not required and therefore summer school tuition is not calculated into the figure. **We also require an upfront non-refundable \$250 international application processing fee. Upon successful admission & registration, this \$250 fee will be applied to your tuition. Should you not be admitted for any reason, you will not be entitled to a refund. However, you will not be assessed this fee again if you reapply within one year.**

Please note that the amounts are not negotiable. You must demonstrate the capability to fund your studies or have your studies funded for your entire program. Having cash on hand does not demonstrate your ability to pay for the duration of your schooling. The US government requires that you prove you can support the costs of living and studying for every year of your academic program. You should not expect to be able to work to help defray the costs of attendance. Although on-campus employment maybe available, it is limited and very competitive. Off campus employment is prohibited unless authorized by the USCIS using your Optional Practical Training (OPT) benefit.

APPLYING FOR ADMISSION:

As an International Student, you must satisfy specific requirements to be considered for admission to Hudson County Community College. The required documents for admission should be submitted to the Office of International Student Services by the deadline dates. If you do not supply all requested information by the deadline dates, we may not have sufficient time to process your Form I-20 for you to take to the US Embassy/Consulate. Upon successful completion of all the admission requirements, you will receive a letter of acceptance, your Form I-20, and information about testing and registration for classes.

Please note that all documents should meet the following criteria, where applicable:

1. **Translated into English;**
2. Less than two months old (financial);
3. Converted to US dollars (financial)
4. Photocopies, scans or faxes. *Do not send us your originals unless indicated* as you will need to take these to the Embassy/Consulate when you are applying for your visa.

It is our hope that this letter answers some of the many questions you may have concerning applying to Hudson County Community College and we sincerely wish you the very best of luck in your educational endeavors.

Sincerely,

Office of International Student Services

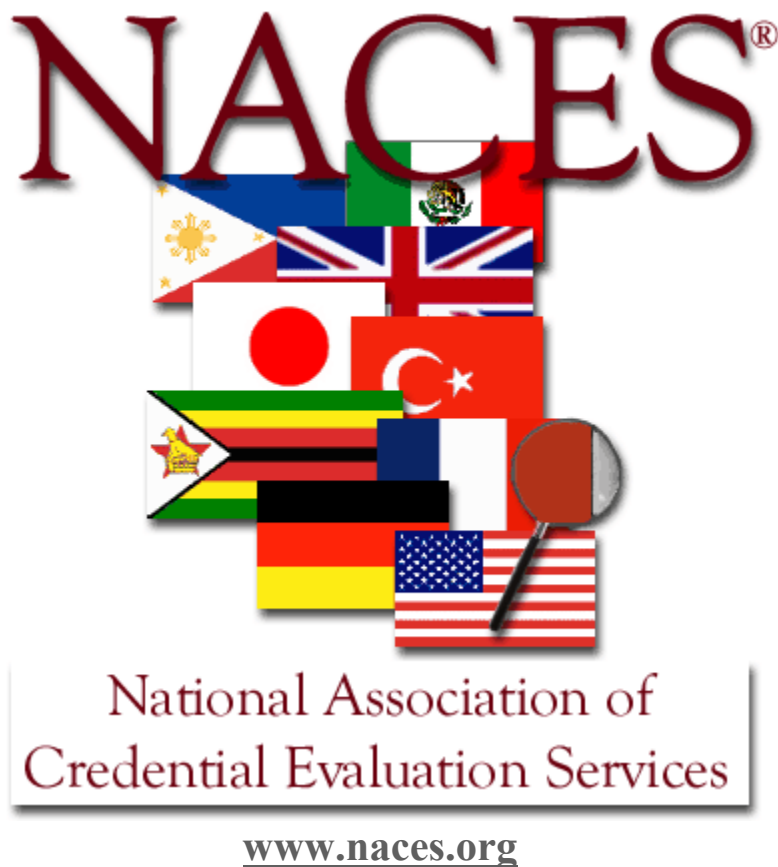
APPLICATION/FINANCIAL DOCUMENTS CHECKLIST

ALL INTERNATIONAL STUDENTS APPLYING FOR A SEVIS I-20				
√	Requirement	Explanation	Original	Copy
	Admissions Application (www.hccc.edu)-PLEASE USE CODE HC3	Online only- send an email when you have applied online to sbullock@hccc.edu	X	
	International Application Processing Deposit	\$250 (Non-refundable)	Cash,/Check or credit card	
	Immunization 1	Measles, Mumps, Rubella (MMR) Series 1 & 2		X
	Immunization 2	Hepatitis B		X
	Immunization 3	Meningococcal (Meningitis)		X
	Immunization 4	COVID-19 VACCINE		X
	Change of Status Request Form (If applicable)	Change of Status Statement Only		X
	Request for Form I-20	(Enclosed)		X
	Foreign Student Agreement	(Enclosed)		X
	Emergency Contact Information	(Enclosed)		X
	Sponsor's Statement	(Enclosed)No Copies Accepted (SUBMIT ORIGINAL ONLY)	X	
	Sponsor's Bank statement	In sponsor's name only; displays deposits & balances (at least two months of recent activity)		X
	Sponsor's Proof of Income	Taxes or 6 months of pay stubs		X
	Residency of Sponsorship Statement	(Enclosed)(No Copies Accepted (SUBMIT ORIGINAL ONLY)	X	
	Room and Board Sponsor's Proof of Income	Taxes or 6 months of paystubs or 6 months of bank statements in Residency Sponsor's name		X
	Room and Board Sponsor's proof of address	Current Utility bill, in Residency Sponsor's name		X
	Student Personal Funds Statement (if student providing personal funds)	2 months of bank statements; shows deposits & balances		X
	High School (All High School graduate transcripts outside of the United States must be evaluated (www.naces.org))	(WWW.NACES.ORG) Choose only one (1) evaluator from the list	X	
	College Transcript (US and/or abroad) *See NACES evaluation list for Out of Country	Official from all institutions	X	
	Passport identification page			X
	Visa and I94 card	https://i94.cbp.dhs.gov/I94/#/home		X
	Social Security Card	If applicable		X
	Form I901 & fee (SEVIS FEE RECEIPT) (incoming freshmen, change of status & reinstated students only) F1 Transfers (copy of receipt)	To be filed with USCIS by student; download form at www.uscis.gov (Immigration Forms); send us a copy after filed with USCIS		X
ADDITIONAL REQUIREMENTS FOR F1 TRANSFER STUDENTS				
Requirement	Explanation	Original	Copy	
Transfer in form	Once you have been accepted		X	
SEVIS Form I-20 (current and previous)			X	
SEVIS Form I-20	Dependent/s			
ADDITIONAL REQUIREMENTS FOR STUDENTS W/ F2 DEPENDENT				
Requirement	Explanation	Original	Copy	
F2 Dependent Information Sheet	(Enclosed)	X		
Attested true copy of marriage certificate	For spouse		X	
Birth Certificate	For each child		X	
Financial Documents evidencing additional funds	\$5000 spouse, \$3000 per child; together with your own financial documents		X	
Identification pages from passport	For each dependent		X	

Transcripts from other institutions:

Please refer to the National Association of Credential Evaluation Services (NACES) website, WWW.NACES.ORG, for information about required documents by country.

If you have earned college-level credit from any US or foreign institution that you wish to transfer to HCCC, you must submit an official, original transcript. For foreign transcripts, you will be responsible for providing all documents certified and translated into English. Your transcript may take **1–2 weeks** to be evaluated for transfer credit by HCCC. **You are not guaranteed to receive credit for any or all courses you have completed.**



GENERAL ANALYSIS FOR (HIGH SCHOOL GRADUATES ONLY)
COURSE BY COURSE ANALYSIS FOR (COLLEGE)

OFFICE OF ENROLLMENT SERVICES
International Student Services
70 Sip Avenue
Jersey City, New Jersey 07306
Phone: (201) 360-4136 or 4128 Fax: (201) 714-2136
Email: internationalstudents@hccc.edu or sbullock@hccc.edu



REQUEST FOR FORM I-20 (Certificate of Eligibility for F-1 Student Visa)

Last Name (Surname): _____ First Name (Given): _____
Please indicate the name exactly as it appears on your passport.

Middle Name: _____
If applicable

Permanent Address in your home country: _____

Local Mailing Address in the USA (Residency Sponsor's address): _____

Telephone Number: _____ Cell Phone Number: _____

Email Address (print clearly): _____

Date of Birth: ____/____/____ Male: ____ Female: ____
(Month) (Day) (Year)

Country of Birth: _____ Country of Citizenship: _____ City of Birth: _____

SEVIS - ID (if applicable): _____ Individual Taxpayer ID No. (if applicable): _____

Intended Field of Study: _____ (Choose only Associate Degree Programs) **(No Certificate Programs)**

Current Visa Type: F-1: ____ F-2: ____ B-1/B-2: ____ H-1/H-4: ____ M-1: ____ J1: ____ OTHER: ____

F-1 visa, are you currently maintaining your status? ____ Are you in good academic standing? ____

Have you previously used your OPT benefit? Yes: ____ / No: ____ Start date: ____/____/____
End date: ____/____/____

Visa Number: _____

Visa Issue Date: ____/____/____ Visa Expiration Date: ____/____/____
(Month) (Day) (Year) [-](Month) (Day) (Year)

Visa Issuing Post: _____ Visa Issuing Country: _____

Admission Number (on I-94 card): _____

Passport Number: _____ Passport Expiration Date: ____/____/____
(Month) (Day) (Year)

Passport Issuing Country: _____

Port of Entry: _____ Country Entry Date: ____/____/____
(Month) (Day) (Year)

Number of dependents who will be accompanying me on F2 status: _____

Dependent Names: _____

Other Comments: _____

I, hereby, affirm that all the information stated above is true to the best of my knowledge.

Signature

Date

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FOREIGN STUDENT AGREEMENT

DIRECTIONS: This agreement is to be read, completed and signed by the student.

1. I understand that as a foreign student F-1 Visa holder in the United States, I cannot establish a domicile in this country. **Furthermore, I understand that I must pay out-of-state international tuition and fees, regardless of my major, length of study or where I reside.**
2. I understand that I must pay a **\$250 non-refundable processing deposit** to initiate the processing of my international student application and upon official acceptance to the college and registration of classes, this fee will be applied to my tuition balance. If my admission is denied or I fail to register for courses, I will not be entitled to a refund. However, I will not be assessed this fee again if I reapply within one year.
3. I understand that in order to maintain F-1 student status, I must register for and actively maintain a full course of study, or a minimum of 12 credits per semester. (Summer Session is not required.)
4. I understand that I must maintain good academic standing, as per the College's Academic Satisfactory Standards defined in the current academic year College Catalog.
5. I understand that I cannot accept employment on or off campus without the explicit consent of USCIS and International Student Services. Without proper work authorization, I may be subject to deportation.
6. I will notify International Student Services within 5 days if I change my legal name, contact information, program of study or other important personal information that may affect my status as a foreign student.
7. I will read and abide by all policies and requirements as stated in the official College Catalog.
8. Each semester International Student Services requires your attendance at a mandatory Orientation & Information Session. Unless excused by a doctor or with express consent of a Designated School Official, **I will attend this event every semester.**

Please print all information and sign where indicated.

Last Name: _____

First Name: _____

Middle Name: _____

Date of Birth: ____/____/____

SEVIS ID (if applicable): _____

Passport Number: _____

I have read the above and fully understand my obligations if I am granted F-1 student status for study at Hudson County Community College. I also understand the estimated annual cost of attendance beginning in the Fall and Spring semester. And I further understand the College reserves the right to change tuition and fees at any time.

I accept full responsibility for payment of all debts and liabilities assumed by me while attending HCCC.

Prospective Student's Signature

Date



SPONSOR'S STATEMENT

By agreeing to sponsor the below foreign student, you are promising the US government that you will provide him/her with a specific amount of money for every year of study at HCCC. This statement must be signed and notarized and will be considered a legal binding document. **NOTE: If there are multiple individuals on the Sponsor's financial statement, each Sponsor must provide a notarized statement. (Please refer to checklist for additional documents that must be supplied and submit "ORIGINAL/NOTARIZED" statement only, "No copies accepted")**

Student's Name: _____

I certify that for every year of study: **(Please circle program chosen)**

___ I will supply funds for the above named individual in the amount of **(REQUEST UPDATED FINANCIAL REQUIREMENTS)**
_____ All other programs Culinary Arts Medical Science
___ I will supply free room and board, transportation and miscellaneous expenses.

Sponsor's Full Name: _____

Relationship to Student: _____

Sponsor's Local Address: _____

ANNUAL INCOME.....\$ _____

LIQUID ACCOUNTS IN THE AMOUNT OF..... \$ _____

STOCKS & BONDS WITH A MARKET VALUE OF.....\$ _____

PROPERTY IN THE AMOUNT OF \$ _____

The following persons are also dependent upon me for support. (Do not list adult children or spouses who are supporting themselves. Also, do not include the student listed above.)

NAME	RELATIONSHIP	AGE
_____	_____	_____
_____	_____	_____

I hereby certify that the above information is correct and complete to the best of my knowledge. Sponsors who fail to provide the promised support jeopardize the student's ability to continue his/her studies in the US. Sponsors should not expect the student to be able to help support the costs through employment. If there is any change in the above information, I will notify the college as soon as possible.

Sponsor's Signature: _____ **Date:** ____/____/____

Notary Seal Required:

Sworn and subscribed before me this _____ day of _____, in the year _____

Signature of Officer of Administering Oath _____

OFFICIAL SEAL HERE



RESIDENCY OF SPONSORSHIP

Hudson County Community College does not provide or locate housing for its foreign students. Students from other countries seeking F-1 status will not be accepted unless proof of a local sponsor is obtained. **A Local Sponsor is someone that will be providing free Room and Board and lives in the Tri-State area such as New Jersey, New York or Connecticut.** This local sponsor must take full responsibility for all living arrangements and accommodations. It is recommended that International Students live within **45 minutes** traveling distance from the college. A local sponsor can supply funds for any expenses as well as all college costs.

(Please refer to checklist for additional documents that must be supplied and submit "ORIGINAL/NOTARIZED statement only, "No copies can be accepted")

This statement must be signed and notarized.

Students name: Mr. or Ms. _____ who is/or will be an F-1 Student is my,
(Relationship to the Student) _____.

I take full responsibility for all the arrangements in accordance with the admissions requirements for International Students. If I am unable to continue this sponsorship, I will notify Hudson County Community College in writing.

Please answer the following questions:

1. Are you a United States Citizen? ___ Yes or ___ No.
2. Are you a Permanent Resident? ___ Yes or ___ No.
3. Permanent Resident – Green Card Number: _____
(A copy of your permanent resident green card is required.)

Room & Board Sponsor's Name: _____

Address: _____

Telephone Number: () _____ - _____

Room & Board Sponsor's Signature: _____ Date ____ / ____ / ____

Notary Seal Required:

Sworn and subscribed before me this _____ day of _____, in the year _____

Signature of Officer of Administering Oath _____

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F2 DEPENDENT INFORMATION SHEET

F-2 dependents are defined as a spouse or an unmarried minor child (<21 years of age) of an F-1 student. If you plan to invite an F2 dependent to join you, please note that you must demonstrate additional funds to support him/her. Currently, you need to show an additional **\$5,000 per year** for a dependent spouse and **\$3,000 per year** for a dependent child. Please submit copies of the following documents. You will need to supply these when you submit the dependent's application for F2 visa to the US Embassy/Consulate.

1. Attested true copy of marriage certificate (spouse)
2. Birth Certificate (for each child)
3. Financial Documentation evidencing additional funds
4. Identification pages from passport for each applicant

.....
Dependent 1:

Last Name (on passport): _____

First Name: _____ Middle Name: _____

Relationship to Student: _____

Date of Birth: ____/____/____

Country of Birth: _____

Country of Citizenship: _____

.....
Dependent 2:

Last Name (on passport): _____

First Name: _____ Middle Name: _____

Relationship to Student: _____

Date of Birth: ____/____/____

Country of Birth: _____

Country of Citizenship: _____

.....
I hereby attest that all information is true to the best of my knowledge. I have read the above and fully understand my obligations as the primary F1 student status holder. I accept full responsibility for payment of all debts and liabilities assumed by me and my dependents while attending HCCC.

Student's Signature: _____ Date: ____/____/____

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EMERGENCY CONTACT INFORMATION

Last Name: _____ First Name: _____ MI _____

STUDENT IDENTIFICATION#: _____ - _____ - _____

Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ - _____ E-Mail: _____

Driver License #: _____

SEVIS #: _____

Emergency Contact in the U.S.

Name: _____

Relationship to Student: _____

Address: _____ Apt #: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ - _____ E-Mail Address: _____

Emergency Contact Outside U.S.

Name: _____

Relationship to Student: _____

Address: _____

Address: _____

Phone: () _____ - _____ E-Mail Address: _____