

## APPLICATION INSTRUCTIONS

There is a co-admission process between the Office of International Education and the School of Graduate Studies.

### Applicants must submit the following documents to:

*Office of International Education (OIE)*

*Engleman Hall, A-220*

*501 Crescent Street ■ New Haven, CT 06515-1335*

- Completed International Student Profile Form
- Current original financial resources statement applicant or sponsor.
- Such statement needs to indicate that the applicant has sufficient resources or will be receiving sufficient sponsorship to provide for, at minimum, one year of tuition, fees, and housing.

### F-1 students transferring or graduating from a college or university in the U.S. must also submit:

- Copy of all previous I-20 forms
- Copy of visa
- Copy of passport
- Copy of I-94 card

### Applicants must submit the following documents to the School of Graduate Studies:

- [Online application](#)
- \$50.00 application fee
- Official report language proficiency scores. Scores older than two (2) years are invalid.
- Official transcripts of all post-secondary education.
- Foreign transcripts must be evaluated by an outside agency. Please contact [Graduate Studies](#) for details.

## International Student Profile Form ■ GRADUATE

### Language Proficiency Requirement

Applicants whose native language is not English must present a score of at least TOEFL - 550 written/213 computer/79 or above on Internet based exam; an IELTS score of 6.5 or higher; Duolingo score of 105 or higher; or Pearson Language Test with a score of 53 or higher, successful completion of ELS 112—English for Academic Purposes; or an earned (Associate, Bachelor, Master, or Doctoral) degree from within the United States. Each student should request that his or her score be sent directly to the Southern School of Graduate Studies (Code 3662).

### Financial Aid

International students are not eligible for Federal Financial Aid. Students may be considered for university scholarships and part-time on-campus employment opportunities. All international students must enroll in nine (9) or more credits each semester, and pay out-of-state tuition.

### Health Forms and Medical Insurance

All students must have medical insurance. The university highly recommends its insurance program for all full-time international students. Health forms must be on file with Student Health Services prior to registration. [Forms](#) may be downloaded from the Student Health and Wellness Center.

### Deadlines for Initial Students

Initial applicants who wish to begin graduate study must submit their International Student Profile Form by **May 1<sup>st</sup>** for the Fall semester or by **October 1<sup>st</sup>** for the Spring semester.

### Deadlines for Transfer Students

Students transferring from a college or university in the U.S. must submit their application and International Student Profile Form by **June 1<sup>st</sup>** for the Fall semester, or by **November 1<sup>st</sup>** for the Spring semester. Transfer students will not receive an I-20 until the SCSU International Student Advisor receives a completed Transfer Form from the student's International Student Advisor at their previous school, and a transfer of the student's record through the SEVIS system.



Cost Estimate

Estimated expenses for a full-time international graduate student residing on campus for the academic year (September-May).

- Out-of-State tuition & fees \$28,690.00
MBA tuition fees \$30,176.00
Indirect Costs (books, supplies, transportation) \$5,824.00
Room & Board \$9,941.00
Medical Insurance (recommended) \$1,000.00

Total \$45,455.00

For more information about the Cost of Attendance please see the cost of attendance page https://inside.southernct.edu/onestop/financial-aid/cost-of-attendance-vs-billed-costs

Estimate Your Expenses for One Academic Year

- Tuition & Fees \$
Books, Supplies, & Transportation \$
Cost of Living (Room & Board) \$
Medical Insurance \$
Dependents \$

(If you have a spouse or child(ren) that will accompany you to the United States, you must include a minimum of an additional \$3,500 per year for your spouse, and \$1,500 per year for each additional dependent.)

Total \$

The Office of International Education will generate the Form I-20 on behalf of the student once the completed profile and appropriate financial documents have been received. The I-20 and acceptance materials will then be sent directly to the student at the address provided here. Electronic or scanned copies cannot be used to apply for the student visa.



International Student Profile Form ■ GRADUATE

STUDENT INFORMATION:

Name must appear exactly as it does on your passport.

Date: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_  
Month / Day / Year

Native Language: \_\_\_\_\_

Gender:  Male  Female

I plan to live on campus:  Yes  No If "No," please complete section 2B on page 6 of this form.

VISA AND IMMIGRATION INFORMATION:

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

Country of Legal Permanent Residence: \_\_\_\_\_

- Current Visa Status:
- Student (F-1)
  - Spouse (F-2)
  - Exchange Visitor (J-1)
  - Spouse (J-2)
  - Tourist (B-2)
  - Temporary Professional Worker (H-1)
  - Dependent of H-1 (H-4)
  - Will apply for F-1 Visa
  - Other (please specify): \_\_\_\_\_

Do you have a Dual Citizenship? :  Yes  No  
If you answered yes, please list additional country of citizenship: \_\_\_\_\_

Are you currently living or studying in the U.S.? :  Yes  No  
If you answered yes, please include a copy of your visa, I-20, and the contact information of your DSO.

Marital Status:  Single  Married  
Will any of your dependents (spouse or children) come to the U.S. with you?  Yes  No How many? \_\_\_\_\_

If "Yes," please include copies of their passports with your application.

CONTACT INFORMATION:

Native Country Address: \_\_\_\_\_  
(Information must be given, even if you currently reside in the U.S.) Street City State/Province

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Country Code City Code Number



U.S. Mailing Address: \_\_\_\_\_  
Street City State/Province

Email: \_\_\_\_\_ Postal Code: \_\_\_\_\_

U.S. Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Country Code City Code Number - -

**EMERGENCY CONTACT:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Last (Family Name) First (Given Name)

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Country Code City Code Number

Address: \_\_\_\_\_  
Street City State/Province

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

**ACADEMIC INFORMATION:**

Choose the major you will pursue at SCSU: [Please click here to select a major.](#)

Master's Program: \_\_\_\_\_ Semester Start:  Spring 20\_\_\_\_  Fall 20\_\_\_\_

U.S. institution you will transfer from: \_\_\_\_\_  
(If applicable)

International Student Advisor: \_\_\_\_\_  
(If transferring from a U.S. institution)

Transfer institution SEVIS School Code: \_\_\_\_\_

**OFFICIAL CERTIFICATIONS:**

*All signatures must be original and recent*

**Section 1 - Financial Support Documentation**

Source of Funding	Required Documentation
Personal Bank Statement (checking/savings)	Certified bank letter/bank statement written in English and in USD
Parent(s)/Sponsor(s)	Affidavit of Support (below) <b>and</b> certified bank letter/bank statement
Government Agency (home country)	Letter of Award

**Additional Support Needed for Dependents**

If you have a spouse or child(ren) that will accompany you to the United States, you must include a **minimum of an additional \$3,500 per year for your spouse, and \$1,500 per year for each additional dependent.** Please note that this estimate for dependents is the minimum amount you must show. If purchasing insurance in the U.S. for dependents, actual costs will likely increase.

**U.S. immigration law requires Southern Connecticut State University to verify that any student seeking an F-1 Visa has sufficient funds to finance their studies for the duration of their program.**

If it is determined that you are admissible to the SCSU School of Graduate Studies, we will provide you with an I-20 (or other eligibility document) only after you have submitted satisfactory evidence that you have adequate funds for your proposed program of study. Acceptable financial documents must not have been issued more than six (6) months before the date you intend to enroll at SCSU, and must accompany this form.

**Section 2A – Certification of Financial Support (Complete only if student is being sponsored)**

This is to certify that I have read the information furnished by the applicant on this form, that the information is accurate, and that my funds will be provided as specified.

SIGNED: _____	Date: _____ Month / Day / Year
Name: _____ (Please Print)	Relationship: _____
Address: _____ Street City State/Province	
Country: _____	Postal Code: _____
Telephone: _____ Country Code City Code Number	Email Address: _____



Section 2B – Room and Board

If you are not living on campus, the individual who will provide accommodate for you during your time in the U.S. must complete this section. The Affidavit of Support must be submitted with your International Student Profile Form. You are responsible to provide the equivalent of \$9,941.00 per year in funding to cover the entire duration of your stay in the United States. If you are no longer receiving accommodation from a sponsor, you will be asked to demonstrate sufficient personal funds reflecting that expense.

Affidavit of Support

I, \_\_\_\_\_ hereby certify that I am willing and able
(Print full name of family member/personal sponsor)

to provide free room and board in my home (equivalent to the minimum room and board requirement for the university amounting to \$9,941.00) to \_\_\_\_\_
(Print student's full name)

during the calendar year to which the International Student Profile Form pertains.

The student will remain with me

from: \_\_\_\_\_ to: \_\_\_\_\_
Month / Year Month / Year

SIGNED: \_\_\_\_\_ Date: \_\_\_\_\_
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_
Address: \_\_\_\_\_ Street City State/Province
Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_
Telephone: \_\_\_\_\_ Country Code City Code Number Email Address: \_\_\_\_\_



**Section 3 – Student Attestation**

I hereby certify that all statements on this form are true and accurate information and that the stated funds are available for my educational expenses at Southern Connecticut State University during the period specified.

**I will notify SCSU of any changes in my financial circumstances.**

Southern Connecticut State University cannot provide funding for international students. It is my responsibility to demonstrate sufficient funds for the duration of my academic career.

As an international student, I am responsible for maintaining a full course of study. **Insufficient funding or changes in sponsorship do not qualify me to be a part time student.**

I am required to register for classes during the university open registration period. Payment for courses in the following term is due at the time of registration.

I will be unable to register for classes if I have an outstanding balance with the Student Accounts office. **Inability to register will affect the requirement that I maintain a full course of study and can result in the termination of my I-20 and student visa.** Student fee bills must be resolved at the time of registration.

During my first year, I will be able to work part-time and on campus as a student worker. Student worker positions are available to all students attending Southern Connecticut State University and are not guaranteed.

Furthermore, I understand that under the Privacy Act, the information I have given cannot be shared with anyone except me and SCSU without my written permission.

SIGNED: \_\_\_\_\_

Date: \_\_\_\_\_  
Month / Day / Year

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

(Please Print)