

## ENGLISH LANGUAGE PROGRAM APPLICATION FORM

| 1. PERSONAL INFORM  | MATION                        |                             |                |                  |                         |  |  |
|---|-------------------------------|-----------------------------|----------------|------------------|-------------------------|--|--|
| First Name:   | Middle Name:                  |                             | Last Name:     |                  |                         |  |  |
| Date of birth: (month/day/ye  | Country of                    | Birth:                      | City of Birth: |                  |                         |  |  |
| Country of Citizenship:   | ai)                           | (                           | Gender:        | Male             | Female                  |  |  |
| Complete Mailing Address (in y  | your country):                |                             |                |                  |                         |  |  |
| Number and Street   |                               |                             | City           |                  |                         |  |  |
| State/Province  | Zip Code                      |                             | Country        |                  |                         |  |  |
| Phone Number:   | Cell Phone:                   |                             | Email:         |                  |                         |  |  |
| U.S. Address (if you have one)  | :                             |                             |                |                  |                         |  |  |
| Number and Street   | ber and Street City           |                             |                |                  |                         |  |  |
| State/Province  | nte/Province Zip Code Country |                             |                |                  |                         |  |  |
| 2. IMMIGRATION/I-2  | 0 INFORMATION                 | I                           |                |                  |                         |  |  |
| <ul> <li>Are you in the United States on an F-1 student visa?</li> <li>Yes  No</li> </ul> |                               |                             |                |                  |                         |  |  |
| If yes, what institution issued   | your I-20?                    |                             |                |                  |                         |  |  |
| Current School Nan  | Name: Phone Number:           |                             |                |                  |                         |  |  |
| • If you are in the U.S. and you are not on an F-1 visa, what visa do you have?           |                               |                             |                |                  |                         |  |  |
| • Are you married?  | Yes □ No                      |                             |                |                  |                         |  |  |
| • Do you have dependents (spouse or children), who will travel with you to the U.S.?      |                               |                             |                |                  |                         |  |  |
| If yes, enter their information   | onbelow:                      |                             |                |                  |                         |  |  |
| An additional \$3,000 USD w   | vill be required for a spous  | e and <b>\$1,50</b> 0       | USDfore        | each child liste | ed on this form         |  |  |
| Last Name   | r ii st i vaine               | nte of Birth<br>nm/dd/yyyy) | Count          | ry of Birth      | Relationship to Student |  |  |
|   |                               |                             |                |                  |                         |  |  |
|   |                               |                             |                |                  |                         |  |  |
|   |                               |                             |                |                  |                         |  |  |

English Language Program at UNF 1 UNF Drive Bldg 14E Jacksonville, FL 32224 **Phone:** (904) 620-4281 **Fax:** (904) 620-4286 **Email:** elp@unf.edu

Website: www.unf.edu/elp

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