



Graduate International Student Admission Requirements

IMPORTANT: Fill out the International Application ONLY if you have an F1 student visa or need an F1 student visa to attend school in the US.

Do not use this form if you are a US Citizen, Permanent Resident, or have been granted another eligible status. Please fill out the Application for Undergraduate Admission located at www.savannahstate.edu

Transfer and Post Baccalaureate

Has 30 or more transferable semester credit hours, or a Bachelor's degree

- \$25.00 non-refundable application fee (cash, check, money order, or cashier's check issued by a US bank)
- International Student Application (pages 3 , 4 & 5)
- One of the following: **Official** TOEFL, IELTS, SAT or ACT score report (page 2)
- Official evaluation of high school transcripts by an approved company (page 2)
- Official evaluation of ALL university or college transcripts by an approved evaluation agency (page 2)
- Proof of vaccinations/immunizations
- Confidential Declaration of Finances and original supporting financial documents (pages 6 & 7)
- Copy of passport (photograph, name, birthday, citizenship, & expiration date) do not include blank pages
- Copy of current I-20 form
- Completed Transfer Clearance Form for Transfer Applicants

Savannah State University requires all International Students to purchase health insurance at the time of registration. If you are already protected by an insurance policy you must have it approved by Pearce & Pearce Student Insurance Specialist.

Application will not be considered complete until the University has ALL required information. Once we have received the completed application packet, your file will be evaluated. If admissible, you will be sent a letter of acceptance and a Certificate of Eligibility (Form I-20) so that you may apply for your student visa.

Please contact Joline Keevy, International Services Specialist, via e-mail at keevyj@savannahstate.edu with any questions you may have.



Explanation of International Student Admissions Requirements

Document	Requirements	Additional Information
Financial Certification	F1 undergraduate applicants must provide financial proof that a minimum of \$27,856 is available for the first academic year	See the Confidential Declaration of Finances form (pages 6 & 7) for more information.
TOEFL	Minimum scores: 523 Paper Based Score 193 Computer Based Test Score 70 Internet Based Test Score	For more information visit www.toefl.org
IELTS	Minimum Score: 6.0	For more information visit www.ielts.org
SAT	Minimum Scores: Critical Reading 430 Math 400	www.collegeboard.com Many scholarships will require an SAT score. You may find it better to take the SAT rather than the English proficiency exam if you plan to apply for scholarships.
ACT	Minimum Scores: English 17 Math 17	For more information visit www.actstudent.org
High School/Secondary School Transcript	Official document-by-document evaluation by an approved agency for all foreign coursework is required. Students who wish to apply for US based scholarships may wish to request a GPA (grade point average) calculation as well since this is often a requirement for scholarship applications. Students who attended a US high school must send official transcripts, but no evaluation is needed.	For document-by-document evaluation, please contact www.jsilny.com or choose from one of the evaluation agencies listed at www.naces.org/members/htm . Please note that the evaluation must come directly from the evaluation agency. Student copies will NOT be accepted.
College/University Transcripts	Official course-by-course evaluation by an approved evaluation agency of each foreign transcript is required. You must also request a GPA (grade point average) calculation. Transfer credit is not guaranteed. Students who attend a US college or university must send official transcripts, but no evaluation is needed.	For course-by-course evaluation please contact www.jsilny.com or choose from one of the evaluation agencies listed at www.naces.org/members/htm . Please note that the evaluation must come directly from the evaluation agency. Student copies will NOT be accepted.
Immunization/ Vaccinations	Required by the Board of Regents of the University System of Georgia of all students who attend classes on campus	See the Student Immunization Form (page 5)
Health Insurance	Proof of health insurance is required of all students while at SSU. You will be enrolled in a mandatory plan when you arrive on campus.	A mandatory health insurance plan will be added to your bill. The International Education Center will assist you during orientation.



International Student Graduate Application

Family/Surname, First/Given Name

Fall (Beginning in August)

Application Deadline: July 1

Spring (Begins in January)

Application Deadline: December 1

Summer (Begins in May)

Application Deadline: April 1

Do not use this form if you are a US citizen, Permanent Resident or have been granted another eligible status. Please fill out the Application for Undergraduate Admission located at www.savannahstate.edu.

Semester and year you plan to enroll: ___ Fall 20___ ___Spring 20___ ___Summer 20___

Application type: (select one) ___ Freshman ___ Transfer ___ Post-Baccalaureate ___ Returning

Check one of the following that best describes your situation:

- Requesting initial entry into the United State.
- Transferring from another school in the United States.
- Requesting a change of status to F1 (also check if you will be filing for re-instatement).

Current Visa: _____ Expiration Date: _____

RESIDENCY

Are you a legal, permanent resident of Georgia? Yes ___ No _____ If yes, of what county? _____

If yes, how long have you lived continuously in Georgia immediately prior to this application? _____

If no, of which state are you a resident? _____

Are you applying for in-state tuition? Yes ___ No _____

In accordance with Board of Regents Policy 4.3.4, all applicants who are accepted for admission or readmission to Savannah State University and seek to be classified as in-state for tuition purposes, will be required to provide validation of residency and lawful presence in both the State of Georgia and the United States.

For the validation purposes above, one of the following documents must be submitted with your **international** application or **readmission** application (check submitted or enclosed document below):

- | | | |
|--|--------------------------|--|
| <input type="checkbox"/> Certified U.S. Birth Certificate (no photocopies) or N-570) | <input type="checkbox"/> | U.S. Certificate of Naturalization (USCIS form N-550 or N-570) |
| <input type="checkbox"/> GA Driver's License (issued after 1/1/2008) | <input type="checkbox"/> | U.S. Certificate of Citizenship (USCIS form N-560 or N-561) |
| <input type="checkbox"/> GA ID Card (issued after 1/1/2008) | <input type="checkbox"/> | U.S. Certificate of Birth Abroad issue by Dept. of State (DS-1350) |
| <input type="checkbox"/> Current U.S. Passport | <input type="checkbox"/> | Consular Report of Birth Abroad (FS-240) |



Application Continued

Family/Surname, First/Given Name

A. Personal Information

US Social Security Number (if available) ____ -- ____ -- ____

***All information should be spelled and included exactly as it is listed in your passport.**

Name: _____

Family/Surname

Given/First

Middle

Former/Maiden

Date of Birth: Month _____ Day _____ Year _____

Gender: _____ Female _____ Male Are you Hispanic or Latino? ___yes ___No

Race/Ethnicity: (Check ALL that apply)

___American Indian/Alaskan Native ___Asian ___Black ___Native Hawaiian/Pacific Islander ___White

Country of Birth: _____ Country of Citizenship: _____

Country of Legal Residence: _____ Native Language(s) _____

B. Contact Information

Email Address: (required) _____

Home Country Information

Telephone: _____

Country code +citycode+number

Mailing Address:

Home Country

Physical Address: _____ Check if same as mailing address

Emergency Contact

Name: _____

Phone: _____

Address: _____

United States Information (if available)

Telephone: _____

Area code + phone number

Mailing Address:

United States

Physical Address: _____ Check if same as mailing address

Emergency Contact:

Name: _____

Phone: _____

Address: _____



Application Continued

Family/Surname, First/Given Name

Will you be leaving the United States before enrolling at Savannah State University? Yes No

If yes: Date of Departure: _____ Date of Return: _____

Will you be renewing an expired visa while out of the country? Yes No

I certify that all statements made in this application are complete and true. **I also understand that falsification of or failure to provide information requested may result in my immediate dismissal and/or loss of all credits from the university.** If my application is accepted and I become a student, I agree to abide by the published regulations of the university and the policies of the Board of Regents of the University System of Georgia, as well as those of the United States Department of Homeland Security.

Signature: _____ Date _____
Month / Day / Year

Confidential Declaration of Finances



Any student wishing to attend Savannah State University in an F1 visa status must complete the Confidential Declaration of Finances and provide original financial documentation. This form is considered complete ONLY when original financial documentation is provided (e.g. letters from banks certifying availability of funds, letters of sponsorships from private sponsors, governments or employers, etc.). The documents must be submitted either in person or by mail. **Emails, copies, scans, and faxes will not be accepted.** The Confidential Declaration of Finances is used to determine the applicant's ability to cover the cost of attending Savannah State University. All supporting documents must be **original and in English, and amounts must be in US dollars and issued with 6 months of application.** According to the United States Department of Homeland Security, SSU may only issue a Certificate of Eligibility (Form I-20) if the applicant has been accepted to the school AND has submitted appropriate financial documentation. Your acceptance letter will be sent to you with your I-20. You must show both forms to the US embassy/consulate to request your visa.

Name: _____
Family/Surname Given/First Middle Former/Maiden

Date of Birth: Month _____ Day _____ Year _____

A. Estimated Annual Expenses 2010-2011

Tuition and Fees (Fall & Spring Semesters only)	\$16,378.00
Books & Supplies	\$1,000.00
Room & Board	\$6,288.00
Medical Insurance	\$830.00
Personal Expenses	\$2,500.00
**Dependents (\$6,300 for spouse & \$3,600 per child)	\$_____ (total for all dependants)
SSU Total Estimated Expenses	\$_____

The figures above represent the estimated **minimal** cost of living in Savannah. Your personal spending may differ significantly. Please note the expenses listed above are for 2 semesters only (a 9 month academic year). Student's planning to attend classes during the summer semester should estimate an additional \$8,000.00 per year. **ALL FIGURES ARE SUBJECT TO CHANGE WITHOUT NOTICE.**

**** B.**

Dependent Information

If you are planning on bringing a spouse or child, additional financial proof is required. Your dependents will be issued an I-20 and must apply for an F2 visa. Please provide the following information:

Spouse: _____
Family/Surname First/given name Date of Birth (mm/dd/yy) Country of birth Country of Citizenship

Child: _____
Family/Surname First/given name Date of Birth (mm/dd/yy) Country of birth Country of Citizenship



Confidential Declaration of Finances Cont.

Family/Surname, First/Given Name

C. Sources of Support

Amount To Be Funded (First Year)

Personal funds. Include an *official* signed bank statement showing current available Funds.

US \$ _____

Family or other sponsor funds. Include an *official* signed bank statement showing Current available funds. (**NOTE: Proof of income will generally not be considered Sufficient alone- please provide additional financial documents.**)

The sponsor(s) must also sign the statement in Section D.

Name of **Primary** Sponsor _____

US \$ _____

Relationship to student _____

Name of **Secondary** Sponsor _____

US \$ _____

Relationship to student _____

Governmental scholarship or loan. A copy of the award letter must accompany This form.

US \$ _____

Other source. Fully explain and document this source of funds on an attached sheet

US \$ _____

Total US \$ _____

D. Sponsor's Certification

I certify that I will provide financial support to (student's name) _____

For the duration of his/her study at Savannah State University. I understand that the estimated costs of attendance are subject to change without notice and that sponsors are expected to plan for reasonable increases. I have examined any laws regarding transfer of funds from my country of residence and will take all necessary steps to ensure that the money can be transferred as needed. I further understand that employment authorization for the student is extremely difficult to obtain and withdrawal of my sponsorship is likely to result in the student's inability to continue her/his studies.

Sponsor's Name (please print) _____

Contact Information _____

Email

Telephone

Mailing Address

Sponsor's Signature _____

Month/Day/Year

I certify that the information is a true reflection of my intended sources of sponsorship while attending Savannah State University. I will be responsible for all debts incurred while undertaking my course of study. I realize Savannah State University is unable to provide me with any financial assistance. I understand that I am legally bound to notify SSU of any change in my financial circumstance.

Student's Signature

Month/Day/Year

Sample Financial Statement

(Your bank may write a letter similar to this sample letter.)



(The bank's professionally printed logo and address must appear on the page.)

(Month, day, year)

International Education Center
Savannah State University
3219 College Dr. PO Box 20187
Savannah, Ga 31404
U.S.A.

FINANCIAL STATEMENT FOR (account owner's name)

This statement verifies that (account owner's name) has maintained an account in good standing with our bank since (month, year) and has a current balance of (amount and type of currency) as of (current date) with an average daily balance of (amount and type of currency) over the last three months.

Sincerely,

(Signature of bank official)

(Typed name of bank official)

(Title of bank official)