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English as a Second Language (ESL) Program APPLICATION

Application for La Roche University academic programs • Home Telephone Number must be submitted at international@laroche.edu. COUNTRY CODE AREA CODE Citizenship ___ ■ Male ■ Female Year 20 _____ • I am planning to reside: ☐ Fall (August) ☐ Spring (January) ☐ Summer (May) ☐ On campus ☐ Off campus Family Name (SURNAME) ____ La Roche University does not provide housing for families. Students accompanied by dependents must make their own arrangements for off-campus housing. First Name (GIVEN NAME) ____ · If you are in the United States, please indicate your current visa status: 🗅 F-1 🔘 F-2 🔘 J-1 🔘 J-2 🔘 Other • Please submit a copy of your current I-20 form (F visa students) or DS-2019 (J visa students) to assist Birth Date _ in processing your application for transfer to La Roche University. Social Security Number (IF APPLICABLE) · PLEASE SUBMIT THE FOLLOWING: Email address ____ 1. Completed application form. 2. Copy of passport photo page. Home/Permanent address 3. High school transcrips with notarized English translation showing attainment of secondary-school degree. NUMBER STREET 4. International student agreement. 5. Affidavit of Support. CITY 6. Certified bank statement dated within the last 3 months. COUNTRY MAIL TO: Current Address (IF DIFFERENT THAN HOME/PERMANENT ADDRESS) International Admissions La Roche University NUMBER STREET 9000 Babcock Boulevard Pittsburgh, Pennsylvania 15237 CITY STATE PHONE: (412) 536-1279 FAX: (412) 536-1188 EMAIL: international@laroche.edu POSTAL CODE COLINTRY

WEB: laroche.edu