



**CPELI Academic Studies Program Application for Visiting Students**  
**A program sponsored by the Cal Poly Pomona Foundation**

**Family Name** \_\_\_\_\_ **First Name** \_\_\_\_\_ **Middle** \_\_\_\_\_  
 As it appears on your passport

Gender:  Male  Female

Date of Birth: \_\_\_\_\_ (month/day/year)

Applicants should be high school graduates.

Program Choice:  Summer 2015  Fall 2015  Winter 2016  Spring 2016

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

Address in home country:

Mailing Address:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Email address: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you currently studying in the U.S. on an F-1 visa?  Yes  No

If yes, please list your current school: \_\_\_\_\_

**Academic History: Applicants with less than 2 years of completed college/university coursework must include high school information**

School Name	City, State, Country	Language of Instruction	Grade System (Letter or Numeric)	Begin Date	End Date	Diploma/Certificate and Date of Completion

Please list any standardized tests that you have completed or plan to complete. (SAT/ACT, SAT Subject Exams, GRE/GMAT, TOEFL, or IELTS)

Testing	Date	Score	Date	Score	Date	Score

Will any dependents (spouse/children) accompany you to the United States?  Yes  No

If yes, list below and send a passport copy for each individual.

Last/Family Name	First Name	Middle Name	Date of Birth	Spouse or Child

Refund Policy	
<input type="checkbox"/> I have read and acknowledge the refund policy below. Tuition and fees can only be refunded upon request of the following BEFORE the program start date as clearly indicated on your I-20: a written request for withdrawal from the program and the original I-20 issued by the Cal Poly English Language Institute. No refunds will be granted AFTER the program start date. Refund requests take six to eight weeks to be processed. Program application fees are non-refundable.	
Signature: _____	Date: _____

Student Certification and Signature	
I certify that the information in the entire form is correct to the best of my knowledge.	
Signature: _____	Date: _____

**Please check off the following items with your application:**

- CPELI Enrollment Application non-refundable fee of \$150. (Payable by AMEX, VISA, MasterCard or money order).
- Copy of your Passport ID page.
- Copy of all high school and/or Undergraduate transcripts translated in English.
- Copy of your Official TOEFL or IELTS score report and results from any other examinations you have completed.
- Financial support statement along with a bank statement with funding of at least \$26,300 USD from the person sponsoring you studies in the U.S.
- Statement of Purpose

**CPELI Representative Information:**

Company Name: \_\_\_\_\_ ID# \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone/Fax: \_\_\_\_\_  
 Address: \_\_\_\_\_ City, State, Zip Code: \_\_\_\_\_

**IMPORTANT For Sponsored Students:**

Our office receives requests from your agent/representative to release your applications status, financial and academic information. Under CPELI policy, your written consent is required to release and information to a third party. By signing below, you authorize the release of the above information.

Student Signature: \_\_\_\_\_

