

## International Students: Admission Requirements

Coastal Bend College is a publicly-supported, comprehensive community college offering the first two years of university-parallel academic studies and an extensive choice of technical and occupational training varying in length from six months to two years.

### Applicant Checklist

1. Complete Coastal Bend College Admissions application. Visit [www.applytexas.org](http://www.applytexas.org)
2. Submit original/official transcripts of school(s) attended at the current educational level. For example, if you attended more than one high school, you must submit original/official transcripts for all high schools. If you attended more than one college/university, you must submit original/official transcripts for all colleges/universities.

If you are under 18, you must also submit proof of high school graduation. Examples: copy of your high school diploma/certificate, official transcripts indicating graduation date, GED certificate that certifies completion of all areas, or official letter issued by the school certifying that you have graduated high school.

*Note: A certified English translation must accompany all transcripts, certificates, and diplomas if the original language is not English.*

3. Provide proof of English proficiency. TOEFL score of 500 on paper-based test or 173-187 on computer-based, or 61 on the Internet based TOEFL. TOEFL Alternatives: SAT Reading 400 or ACT verbal 21 English or students who have at least 12 transferable hours AND complete English Composition I with a C or better or completion of the advanced-level Texas Intensive English Program (TIEP) offered by TIEC.
4. Submit Immunization records including Bacterial Meningitis immunization. (*Note: If you are over 21, you do not have to have the Bacterial Meningitis immunization*)
5. Submit an original statement/letter from your bank or other financial institution. The name of the person on the bank statement should match the name of the person identified on the Sponsor Affidavit Form.
  - The bank statement/letter must be in English. If the bank statement/letter is not in English, please provide a certified English translation of the document.
  - Your funds must be from a checking, saving, or certificate of deposit account. *Note: We do not accept funds such as stocks, investments, retirement, etc.*
  - It must be issued by your bank or financial institution. The bank statement/letter must contain the date, name of the account holder(s), and states that there is funding available in the amount of at least **\$13,000 USD**.
  - Bank statement/letter is valid for 3 months from the date of issue.
  - If bank statement/letter is not issued by a U.S. bank, currency must be specified in the statement/letter. If you have funding from multiple sources, you will need a bank statement/letter from each source.
  - The statement/letter must also be signed and stamped by a bank official at the financial institution.
6. Complete the I-134 Sponsor Affidavit Form and obtain all necessary signatures.  
*Note: If there are multiple account holders on your bank statement, please submit one affidavit form for each of the account holders. Visit [www.uscis.gov/i-134](http://www.uscis.gov/i-134) for more information.*

*Coastal Bend College does not discriminate on the basis of race, creed, color, national origin, gender, age or disability.*

The U.S. Immigration and Naturalization Service Form I-20 will not be issued until admission procedures are completed to the satisfaction of the college. International students are required to purchase illness and accident medical insurance coverage specified by the college during their entire period of study at CBC unless they are already covered by health insurance that covers medical cost incurred in the U.S. After acceptance by CBC, and before registration, the college requires international students to take a series of assessment tests in English, Mathematics, and Reading to comply with the Texas Success Initiative (TSI). Results of these tests will determine courses in which a student may register. International students are subject to TSI requirements as are all students at CBC.

***STUDENT HOUSING:*** The CBC has a dormitory which houses 138 men and women students and 20 one-bedroom apartments. Housing application fee for dorm/apartment of \$250 (which is non-refundable) to reserve housing. There is also a residential fee of \$50 for dorm/apartment students. There is a waiting list so reservations should be made as soon as possible. Some private housing may be available in the community. Local realtors would have listings.

***TRANSPORTATION:*** There is no public transportation available in Beeville. Students who find housing in the community will need an automobile or bicycle in order to travel to and from the college campus.

***EXPENSES:*** An international student enrolled in a full program of study should expect to pay to the college a sum of approximately \$3,600 for tuition and student fees, approximately \$1,000 for books, approximately \$2,600 for dorm and meal plan, approximately \$600 per month for CBC apartment rent. This must be paid directly to the college. Personal expenses can easily add another \$1,000 each semester.

***STUDENT ACCIDENT AND SICKNESS INSURANCE:*** All international students are required to purchase accident and sickness medical expenses insurance each semester of their attendance at Coastal Bend College.

Name of Applicant \_\_\_\_\_

(print)

EDUCATIONAL DATA  
RECORDS OF SECONDARY AND HIGHER EDUCATION  
PREVIOUS EDUCATION

Column 1 - Actual years of schooling. The first year of schooling is Number 1, the second year Number 2. etc.

Column 2 - For each year write the grade, form, standard or class, using the terminology of the educational system attended.

Column 3 - List in chronological order every academic year in which you attended school, including any in which you remained in one grade for more than one year. If you were out of school for a year or more explain the interruption on a separate sheet of paper.

Column 5 - Write the type of school you attended during each academic year, such as elementary, colegio, ecole secondaire, gymnasium, istituto, university, etc, using the terminology of the educational system.

Column 8 - Write the name of any examinations passed, or certificates, diplomas, or degrees earned, such as Certificate of Education, Bachillerato, Abitur, Maturita, Baccalaureate, Studentereksamen, etc, using the terminology of the educational system.

1 Year In School	2 Grade Level	3 Academic Year	4 Age	5 Kind of School	6 Name and Address of School (City and Country)	7 Primary Language of Institution	8 Certificates, Diploma, Degrees, & Graduations
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							

LIST ANY ACADEMIC HONORS YOU HAVE RECEIVED – prizes, scholarships, fellowships, etc:

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*Form is protected by FERPA (Coastal Bend College Policy FB (LEGAL) & FJ (LOCAL)) & may not be copied or disbursed without written permission of Registrar.*

## International Student Record of Immunization

Name of Applicant \_\_\_\_\_  
**(print)**

Before being accepted to Coastal Bend College, an international applicant must show proof of immunization against the disease listed below. Please have this form filled out and signed by your medical doctor.

1. Measles - Has the above named applicant ever had measles? \_\_\_\_\_  
If yes, when? \_\_\_\_\_  
If no, has he/she been immunized against measles? \_\_\_\_\_  
If yes, when? \_\_\_\_\_
  
2. Rubella - Has the applicant been immunized against rubella? \_\_\_\_\_  
If yes, when? \_\_\_\_\_  
If no, has he/she had a positive serologic test? \_\_\_\_\_
  
3. Tetanus/Diphtheria - Has the applicant been immunized against tetanus/diphtheria within  
the last ten (10) years? \_\_\_\_\_  
If yes, when? \_\_\_\_\_
  
4. Poliomyelitis - Has the applicant been immunized against poliomyelitis? \_\_\_\_\_  
If yes, when? \_\_\_\_\_

Comments (of doctor) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Medical Doctor Date

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