



# LABETTE COMMUNITY COLLEGE

## INTERNATIONAL STUDENT ADMISSIONS APPLICATION

PLEASE TYPE OR PRINT IN INK

Return to: Labette Community College  
 ATTN: Admissions Office  
 200 S. 14<sup>th</sup> Street  
 Parsons, KS 67357  
 FOR OFFICE USE ONLY  
 Application Fee Received Yes \_\_\_ No \_\_\_  
 Student on Computer \_\_\_ Date \_\_\_\_\_

When do you plan to enter LCC? \_\_\_ August 20\_\_\_ \_\_\_ January 20\_\_\_ \_\_\_ June 20\_\_\_

Legal Name \_\_\_\_\_  
 FAMILY/LAST (SUFFIX) FIRST/GIVEN MIDDLE MAIDEN OR OTHER

Permanent Home Address \_\_\_\_\_  
 STREET CITY/TOWNSHIP

STATE/PROVINCE COUNTRY POSTAL/ZIP CODE

Telephone \_\_\_\_\_ Secondary Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Local Address Information (For use only if you have a United States address)** -----

Mailing Address \_\_\_\_\_  
 STREET CITY STATE ZIP CODE

Telephone \_\_\_\_\_ Secondary Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**Demographic Information** -----

Gender: Male \_\_\_ Female \_\_\_ Social Security Number (if applicable) \_\_\_\_\_ Birth Date \_\_\_/\_\_\_/\_\_\_

Secondary/High School Graduation Date \_\_\_/\_\_\_/\_\_\_ What is your native language? \_\_\_\_\_

**Emergency Information** -----

Person to contact in case of an emergency: \_\_\_\_\_  
 FAMILY/LAST FIRST/GIVEN RELATIONSHIP

STREET CITY/TOWNSHIP STATE/PROVINCE

POSTAL/ZIP CODE PHONE NUMBER E-MAIL ADDRESS

**Resident Alien Section (For resident aliens only)** -----

A copy of both sides of your resident alien card(s) is required.

Resident Alien Number \_\_\_\_\_ Date Issued \_\_\_/\_\_\_/\_\_\_ Date Moved to Kansas \_\_\_/\_\_\_/\_\_\_

**All International Students Section**-----

What is your country of citizenship? \_\_\_\_\_ What is your country of birth? \_\_\_\_\_

Have you traveled/lived outside the United States for at least 3 months? Yes \_\_\_ No \_\_\_

If yes, please provide dates & countries. \_\_\_\_\_

Did you graduate from a U.S. high school? Yes \_\_\_ No \_\_\_

Name of high school \_\_\_\_\_ Graduation Date \_\_\_/\_\_\_/\_\_\_

Have you taken the TOEFL/ IELTS? Yes \_\_\_ No \_\_\_ If yes, list score \_\_\_\_\_

If you plan to attend Labette while attending another college full-time, please print the college name. \_\_\_\_\_

You must submit a "guest student" letter to Labette's International Student Advisor from your college/university EACH semester you enroll at Labette.

If you are applying for an I-20 from Labette, how many dependents will be listed on your I-20? \_\_\_\_\_

What is their relationship to you? Spouse \_\_\_\_\_ Child(ren) \_\_\_\_\_

**International Transfer Students (Complete only if you have attended another U.S. College) -----**

If transferring from another college, please list the college that issued your most current I-20. \_\_\_\_\_

A "Request for Information on an F-1 Transfer Student" form must be completed and signed by the International Student Advisor at the above-named college. This form may be obtained from Labette's International Student Advisor.

INS Number \_\_\_\_\_ VISA Type currently held \_\_\_\_\_

Date VISA was issued \_\_\_\_/\_\_\_\_/\_\_\_\_

**Educational Goal Information -----**

College Major \_\_\_\_\_ Are you seeking a degree from LCC? Yes \_\_\_\_\_ No \_\_\_\_\_  
(Write undecided if you are unsure of your major)

Are you planning to transfer to another college after Labette Community College? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you attended another college before Labette? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, list college name \_\_\_\_\_

Labette Community College has permission to use my directory information, student identification photograph, and future photographs for the purpose of institutional research, student verification, and/or marketing. Yes \_\_\_\_\_ No \_\_\_\_\_ (If unchecked the college assumes permission is given.)

I certify that all the information I have provided on this application is complete and correct to the best of my knowledge, and that all prior academic work is accounted for. I also authorize the release of all high school or college transcripts and other pertinent records to Labette Community College. I understand that failure to disclose information or providing false information on this application could result in my dismissal from LCC.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

SIGNATURE AND \$100.00 U.S. DOLLARS NON-REFUNDABLE FEE REQUIRED FOR THIS APPLICATION TO BE PROCESSED.