



Port of Entry Program

凡有意參加本校「新進港」英文班而申請 I-20 表格者,請按以下進行,並呈交以下所須文件:

(一)入學文件

1. 英文班報名表格。
2. 紐約市立大學 (CUNY) I-20 申請表格
3. 同意書:列明參加英文班要遵守的規則。請在同意書上簽名。
4. 高中或大學畢業證明, 必須翻譯成英文及公證。

(二)經濟擔保文件-可選擇 1 或 2。如申請人存款數額未達標準可用 1 及 2:

1. 出示申請人名下, 美金\$25,000 元以上的銀行存款原本, 在美國或其本國的銀行均可 (有效期內的定期或活期)

或

- 2 請經濟擔保人填寫紐約市立大學 (CUNY) 的經濟擔保表格, 須在公證人面前簽署才有效, 另外呈上擔保人之身份證明, 收入證明 (可用稅單), 銀行存款證明及列明目前收入之工作證明等文件

(三)如果申請人已在美國,則須出示護照,簽證(I-94 卡) 以及以前進修學校之 I-20。海外申請學生只須呈交護照複印本。

(四)轉校的 F-1 身份者 必須呈交轉校證明表(F-1 STUDENT STATUS VERIFICATION FORM) 以證明在以前學校之出席率及學業成績之表現。

(五)欲更改為 F-1 身份者,須填寫 I-539 表格(更改身份申請表)。

(六)申請費: \$100 (不退還), 只收支票或 MONEY ORDER, 擡頭請寫 “QCC Auxiliary Enterprise, INC”。 學生正式入讀英文班時, 此申請費可抵免\$100 元學費。

(七)將表格及申請費郵寄或呈交到「新進港」英文班辦公室
SCIENCE BUILDING, ROOM 108
QUEENSBOROUGH COMMUNITY COLLEGE
222-05 56 AVENUE, BAYSIDE, NY 11364
電話 (718) 281-5410 電傳 (718)281-5069

(八)文件經評審後,經過移民局的批准後才可以領取 I-20 表格。



Application for the Immigration Certificate of Eligibility (Form I-20)

International students who are admitted into a degree program at CUNY will need to obtain an Immigration Certificate of Eligibility (Form I-20), in order to enter and/or remain in the U.S. as an F-1 student. This requirement applies whether you are a new student, a transfer student from another U.S. university, or a student transferring between CUNY colleges.

(Please print clearly)

1. Name Sex (check one) Male Female
(Family name as in passport) (Given name as in passport) (Second given, or middle name, if any, as in passport)

2. Present Mailing Address
(Number and Street) (City, State) (Country) (Postal Code)

3. Telephone Number Fax Number Email

4. Date of Birth Place of Birth
(Month/Day/Year) (City and Country)

5. Country(ies) of Citizenship Country of Residence

6. Permanent Overseas Address
(Required by U.S. Government Regulations) (Number and Street) (City, State) (Country) (Postal Code)

7. Address in U.S.A. (if known)
(Number and street) (City) (State) (Zip Code)

8. Expected Semester of Enrollment: Fall 20 Winter 20 Spring 20 Summer 20

9. Academic Major ENGLISH LANGUAGE AND LITERATURE

10. Are you currently studying at a U.S. institution or college?

11. Do you currently hold F-1 status?

TO BE COMPLETED BY APPLICANTS ALREADY IN THE U.S.

If you are currently in the U.S., please indicate your immigration status. Attach a copy of the passport pages with the passport number, expiration date of passport, and the U.S. visa stamp. Include copies of both sides of Form I-94 for yourself and accompanying family members.

12. F-1 Student Status I-94 Admission # (Attach copies of ALL your previously issued Forms I-20)

13. University that issued most recent Form I-20 SEVIS #

14. Current U.S. school: Name:
Address:
(Number and Street) (City) (State) (Zip Code)

15. Other Immigration Status (If Applicable, specify type)

16. I-94 Admission No. I-94 Expires on:
(Month/Day/Year)

Declaration & Certification of Finances

Please indicate the source and amount of your financial support for the first four years of study for bachelor's degree candidates and two years for associate's degree candidates. The CUNY college that has admitted you requires documentation of guaranteed support for the first year and projected support for future years. Note that costs may rise 7-10% annually. Total amounts must meet or exceed the estimate of expenses (see "Sponsor Supporting Evidence" page).

U.S. immigration authorities require colleges to receive satisfactory financial certifications from prospective students before issuing a Form I-20. Therefore, you must attach original documents for each source of financial support you indicate. Please refer to the "Sponsor Supporting Evidence" page for a list of acceptable supporting documents. Be sure to have an additional set of original documents for your appointment at the U.S. Consulate (or Embassy) overseas.

Complete and send in this page with your application. Provide as much detail as possible.

SOURCES OF FINANCIAL SUPPORT

(Amount in U.S. Dollars)

	Guaranteed Support 1 st Year	Projected Support 2 nd Year	Projected Support 3 rd Year	Projected Support 4 th year
A. Student				
Name _____	\$ _____	\$ _____	\$ _____	\$ _____
Name of Bank _____			Location _____	
			(City)	(Country)

The student must provide the following documents in English:

- 1) Bank officer's summary statement of account history.
- 2) Stock brokerage account statements, if any.

Name of spouse and children accompanying or following to join person:						
Spouse	Sex	Age		Child	Sex	Age
Child	Sex	Age		Child	Sex	Age

B. Parents, and/or other individual sponsors

Name _____				
Relationship to student _____	\$ _____	\$ _____	\$ _____	\$ _____
Name _____				
Relationship to student _____	\$ _____	\$ _____	\$ _____	\$ _____

C. Government, University, or Other Sponsor

Source _____				
Source _____	\$ _____	\$ _____	\$ _____	\$ _____
(Attach current signed official copy of the terms of sponsorship, including amount of support in U.S. Dollars and period covered.)				
Grand Totals	\$ _____	\$ _____	\$ _____	\$ _____
	(Each total must equal the estimate of expenses for one year.)			

The college cannot issue a Form I-20 until you meet all requirements for financial documentation.

By signing my name to this form, I certify that the information above is a correct statement of my arrangements for financing my studies at a two year or four year college of The City University of New York.

(Student's signature) _____ (Date) _____

(Please print name) _____

Responsibilities of an I-20 Student

1) I will attend the program in (check one):

___A. Fall

___B. Spring

___C. Summer

- 2) If I plan to transfer to another school, I understand that I **MUST** file my transfer documents **NO LATER THAN 60 DAYS** after the final day of the last program I attended.
- 3) I must attend classes. Four (4) excused absences is the maximum allowed.
- 4) Visa changing student must pay a full tuition even though approval to F-1 status is granted by US immigration and Naturalization Services after program begins.
- 5) I have to complete all assignments and fulfill all requirements.
- 6) Continuation in the Port of Entry English Language Development Program for a second semester is contingent upon my performance in my first semester based on my completion of class assignments, requirements, test scores, attendance, punctuality, and good class conduct, and at the DISCRETION OF THE INSTRUCTORS AND DIRECTOR.
- 7) I must attend and complete three (3) programs in a calendar year to be allowed to take an annual vacation only in the summer if I am eligible and intend to register for the next program. I also understand that if I am an F-1 visa student, I can take leave during program break with the approvals from the Program Director and the Director of International Student Services.
- 8) Students who enroll in the ibt-TOEFL class are not guaranteed a second term because there is a 'no repeat' policy for that class, and the Advanced class may not be offered every semester.

I have read and understood the above responsibilities as an I-20 student.

Signature

Date

Affidavit of Support

This form is for individuals using their own income and/or savings to support a student. It must be completed by the person who will provide the student with full or partial financial support and/or room and board during the student's course of study at The City University of New York. **Sponsors providing financial support must complete items 1-6; sponsors providing room and/or board must complete Items 1 and 7.**

SPONSOR INFORMATION

1) I, _____, citizen of _____,

(Name of sponsor)

(Country/ies)

and residing at _____,

(Street)

(City/State)

(Country)

(Postal Code)

(Telephone)

certify the following:

2) I am employed with _____,

(Name of employer)

located at _____.

(Street)

(City/State)

(Country)

(Postal Code)

(Telephone)

I receive an annual income of \$ _____ (U.S.) from this employment. Attach a current salary confirmation statement written by that employer, or verification of annual income for self-employed or retired individuals. The employer statement or verification of annual income must be written in English or come with a certified translation.

3) I have \$ _____ (U.S.) on deposit with

Name of Bank: _____

Address of Bank: _____

(Number and Street)

(City)

(State)

(Postal Code)

Attach bank officer's statement of account history.

4a) I currently support _____ persons (including myself). Our total annual income is \$ _____ (U.S.).

Our total family expenses are \$ _____ (U.S.).

4b) I sponsor _____ (number) individuals for immigration in addition to this affidavit.

STUDENT SUPPORT INFORMATION

5) This affidavit is executed on behalf of _____ who was born on _____, S/he is my _____

(Name of Student)

(Month/ Day /Year)

(Relationship to Sponsor)

6) I hereby certify that I am willing, able, and do commit to provide _____ with the annual amount of

(Name of Student)

\$ _____ (U.S.) for her/his tuition, fees, and/or living expenses each year during the entire program of study at The City University of New York until (give a date when the sponsorship is expected to terminate).

ROOM AND BOARD SUPPORT INFORMATION (To be completed if student will live in the sponsor's home in the U.S.).

7) I hereby certify that I will provide _____ with (check one):

(Name of Student)

Room only in my home at the address indicated above (valued at \$7,081)

or

Full room and board in my home as indicated above (valued at \$9,250) during each year that s/he follows a program of study at CUNY.

Note that this value cannot be included in any amount of support being provided in #6, above. Attach a copy of your lease or deed or copy of a statement from your landlord.

By signing my name to this affidavit, I certify that the information above is a correct statement of my agreement to sponsor the student herein named.

Signature This affidavit must be signed.

(Signature of sponsor) _____ (Date) _____

(Please print name) _____ (Date) _____

OATH OR AFFIRMATION OF DEPONENT

Subscribed and sworn to (affirmed) before me this _____ day of _____, 20_____

at _____ . My commission expires on _____

Signature of Officer Administering Oath _____ Title _____



QUEENSBOROUGH COMMUNITY COLLEGE

The City University of New York

Port of Entry Program
Science Building, Room 108

Telephone: 718-281-5410
Fax: 718-281-5069

F-1 STUDENT TRANSFER ENROLLMENT STATUS FORM

U. S. Citizenship & Immigration Services requires this office to have the following information in order to process your transfer to the Port of Entry English Program at Queensborough Community College. **Section 1 needs to be completed by you.** After you have completed Section 1, **please submit this form to the International Student Advisor** at the last school you attended before you were accepted to this college.

Section 1 – TO BE COMPLETED BY STUDENT

I have been admitted to the Port of Entry English Program at Queensborough Community College for the _____ Semester. I grant permission for the information below to be forwarded to Queensborough Community College’s Office of International Student Affairs.

LAST NAME	FIRST NAME	DATE OF BIRTH	SOCIAL SECURITY (STUDENT I.D. NUMBER)
COUNTRY OF BIRTH	I-94 NUMBER		SEMESTER OF REQUESTED ADMISSION <input type="checkbox"/> FALL, _____(YR) <input type="checkbox"/> SPRING, _____(YR)
STUDENT’S SIGNATURE		TODAY’S DATE	

Section 2 – TO BE COMPLETED BY INTERNATIONAL STUDENT ADVISOR

The International Student named above has been admitted to the Port of Entry Program at **Queensborough Community College** for the term indicated. In accordance with Immigration regulations, our office cannot process a school transfer for the student until we have determined if he/she has been maintaining his/her status for the preceding term. Please complete **Section 2** and return this letter to the Port of Entry Program Office, Queensborough Community College, 222-05 56 Avenue, Bayside, NY 11364, Fax Number: (718) 281-5069. **In the SEVIS System, Queensborough Community College is located under THE CITY UNIVERSITY OF NEW YORK! (NYC214F00812016)**

SEVIS ID NUMBER	SEVIS RELEASE DATE
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1. Student ___ was / ___ was NOT authorized to attend our school according to Immigration regulations.
2. Student was pursuing a full course of study or maintaining status the preceding _____ term, _____(year).
Date Attended: From ___/___/___(MM/DD/YY) to ___/___/___(MM/DD/YY)
3. Student was not pursuing a full course of study or maintaining status the preceding term (or the last term preceding the summer vacation). Please advise the student to apply for reinstatement with the U.S.C.I.S.
4. In my opinion the student is eligible for transfer under Notification Procedure: YES ___ / NO ___

Comments: _____

Signature of Designated School Official: _____ Date: _____

Name of DSO (Please Print) _____ Title: _____

Name of Institution: _____ Telephone: _____

Address: _____ E-Mail: _____