



Port of Entry Program

To obtain an **I-20** form through the study of the “Port-of- Entry” English Program at Queensborough Community College, the applicant must submit the following documents:

1. Application for the “Port-of-Entry” English Program.
2. Application for the Immigration Certificate of Eligibility (I-20 Form)
3. Responsibilities of I-20 Student Form.
4. High school or college graduation diploma. Must be translated in English and notarized.

In addition, we also need the following documents required by the U.S. Immigration Department:

5. Applicant can choose (1) or (2) or (1) and (2) pending on the saving amount:
 - (1). Applicant’s original current/valid bank statement (saving or checking, regular or time deposit) from USA or country of origin. The minimum balance required is US\$25,000.
 - (2). A CUNY Affidavit of Support to be filled out and notarized by the applicant’s financial sponsor, and proofs of financial support including original current bank statement, proof of income and original job verification letter.
6. A copy of the passport. If the applicant is already in USA, please show passport and I-94 form.
7. File an I-539 form for changing current VISA status to F-1.
8. File an F-1 student status verification form and submit the I-20 forms from all previous schools or ESL programs for transfer students.
9. Application fee: \$100 non-refundable. Check or Money Order payable to “QCC Auxiliary Enterprise, Inc”. This \$100 will be counted as part of the tuition payment if change to F-1 status is approved or F-1 visa is granted from the country of origin.

Please mail or submit the above documents to the Port-of-Entry Program Department at the Science Building, Room 108, Queensborough Community College, 222-05 56th Avenue, Bayside, NY 11364. For further information, please call (718)281-5410. Fax is (718)281-5069.



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 _____

SPONSOR SUPPORTING EVIDENCE

A sponsor must show sufficient income and/or financial resources to assure that the student being sponsored will not become a public charge (receive Federal or State low income benefits or services) while in the United States.

Evidence should consist of copies of any or all of the following documentation listed below that are applicable to the sponsor's situation. Failure to provide evidence of sufficient income and/or financial resources may result in the denial of the student's application for a visa or his or her removal from the United States.

The sponsor must submit evidence of income and resources, as appropriate:

- A. Written statement from an officer of the bank or other financial institution or brokerage where the sponsor has accounts, giving the following details regarding the account:
 - 1. Date account opened
 - 2. Total amount deposited for the past year
 - 3. Present balance

- B. Statement of your employer on business stationery showing:
 - 1. Date and nature of employment
 - 2. Salary paid
 - 3. Whether the position is temporary or permanent

- C. :
 - 1. Copy of last income tax return filed or
 - 2. Report of commercial rating concern
 - 3. Schedule of assets with supporting documents

Estimate of 2007 – 2008 Expenses for International Students Attending the City University of New York

Tuition and Fees per academic year (12 months)	four year colleges	\$8,937.00*
	two year colleges	\$4,828.00*
	masters & doctorate	see CUNY GRADUATE TUITION SHEET

Student Living Expenses

Books and Supplies	\$1,094.00
Transportation	\$1,088.00
Personal Expenses	\$4,821.00
Housing	\$7,081.00
Meals (at home)	\$2,169.00
Lunch	\$1,360.00
Total Student Living Expenses	17,614.00

Total First Year Expenses **4 year college students \$26,551.00**
2 year college students \$22,441.00

Language Training Program (Queensborough Community College Port of Entry)

Tuition and Fees per academic year	\$ 2,600.00
Transportation	\$ 1,088.00
Personal Expenses	\$ 4,821.00
Housing	\$ 7,081.00
Meals (at home)	\$ 2,169.00
Lunch	\$ 1,360.00
Total Student Living Expenses	\$16,519.00
Total First Year Expenses	\$19,119.00

* Tuition and Fees stated are based on the students taking at least 12 credits per semester at Queensborough Community College. This is the minimum number of credits required to be a full-time student (necessary to maintain lawful immigration status). If you take more than 12 credits, you will be charged at the rate of \$190 per credit (two year colleges) or \$360 per credit (four year colleges).



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: _____