

# INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

VISA TYPE: F-1

**NorthCentral**  
MISSOURI COLLEGE

FOR OFFICE USE ONLY

Student ID #: \_\_\_\_\_

1301 Main Street Trenton, MO 64683

660-359-3948

## SECTION 1

FAMILY NAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_ MIDDLE NAME: \_\_\_\_\_

GENDER:  Female  Male BIRTH DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

COUNTRY OF BIRTH: \_\_\_\_\_ COUNTRY OF CITIZENSHIP: \_\_\_\_\_

### FOREIGN ADDRESS

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ Providence/Territory: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

### U.S. ADDRESS (if known):

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Postal Code: \_\_\_\_\_

### MY NCMC ENROLLMENT PLANS ARE: (Check only ONE)

- Transfer from NCMC with a **Associate in Arts** or **Associate in Arts in Teaching** degree (Transfer degree)  
 Graduate from NCMC with an **Associate in Applied Science** degree (AAS)  Graduate from NCMC with a one-year **Certificate**

### PROGRAM START DATE: (Semester & Year)

- Fall 20\_\_\_\_  Spring 20\_\_\_\_  Summer 20\_\_\_\_

PRIMARY MAJOR: \_\_\_\_\_

### TRAVEL INFORMATION (complete all information currently available)

Passport Number: \_\_\_\_\_

Visa Number: \_\_\_\_\_ Issue Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

Visa Issue Post: \_\_\_\_\_

Port of Entry: \_\_\_\_\_ Date of Entry: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

I-94/Admission Number: \_\_\_\_\_

### PROVIDE ALL OF THE FOLLOWING THAT ARE CURRENTLY AVAILABLE:

Social Security Number: \_\_\_\_\_ Individual Taxpayer ID Number: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

I certify that this is accurate and true information.

Signature (in ink) \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

## SECTION 2

COMPLETE THE FOLLOWING FOR **ALL** OF YOUR DEPENDENTS:

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Gender:  Female  Male Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

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

Relationship: \_\_\_\_\_

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Gender:  Female  Male Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

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

Relationship: \_\_\_\_\_

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Gender:  Female  Male Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

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

Relationship: \_\_\_\_\_

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Gender:  Female  Male Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

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

Relationship: \_\_\_\_\_

Family Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Gender:  Female  Male Birth Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)

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

Relationship: \_\_\_\_\_

*I certify that this is accurate and true information.*

Signature (in ink) \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
(mm/dd/yyyy)