

INTERLINK Language Centers
Print Application Form
www.eslus.com

To print, use your browser's print option. Type or clearly print all the information requested below.

Fax or send this application with:

- a. an official copy of your high school or university grades;
- b. an official financial support statement from your bank, sponsor or guardian, certifying that you have at least US \$5,000 available for each term at INTERLINK;
- c. \$100.00 non-refundable application fee;
- d. a non-refundable security deposit as follows:

Colorado School of Mines	\$50	Valparaiso University	\$50
Indiana State University	\$20		

To pay by check, please make check payable to INTERLINK Language Centers.

To pay by bank wire, contact the center you wish to apply to for more information.

To pay the fees by Visa or MasterCard, use the form at <http://eslus.com/esl/creditcard.pdf>.

Fax or send application materials directly to the appropriate center:

INTERLINK Language Center Colorado School of Mines, Golden Colorado 80401 Fax: (303) 278-4055	INTERLINK Language Center Indiana State University Terre Haute, Indiana 47809 Fax: (812) 237-8031
INTERLINK Language Center The University of North Carolina at Greensboro Greensboro, N.C. 27402-6170 Fax: (336) 334-4701	INTERLINK Language Center Valparaiso University Valparaiso, Indiana 46383-6493 Fax: (219) 464-6846

Print Application Form

I. REQUIRED INFORMATION You must fill out all the information in this section.

1. _____
Family Name First Name

Your name must be spelled exactly as it is on your passport. If possible, send us a copy of your passport.

2. _____
E-mail address

3. _____
Residence Address (PO Box or Street No.)

City State or Province Country Postal Code

4. If your mailing address is the same as your residence, type "same" below. If your mailing address is different, type your complete mailing address:

Mailing Address (PO Box or Street No.)

City State or Province Country Postal Code

5. _____
Telephone Number

6. _____ 7. _____
Country of birth: Country of citizenship:

8. Date of birth: _____
DayMonth Year

Your date of birth must be the same as on your passport.

9. Male Female 10. Single Married
Gender (circle one) Marital Status (circle one)

11. If you are married, will your family accompany you? Yes No
If yes, complete Part III below. (circle one)

12. Expected start of INTERLINK studies: 2010 2011 2012 2013
(circle one)
January March May August October
(circle one)

I understand the terms of my admission and agree to follow the rules of the Center and the University. I, and/or my sponsor, will be fully responsible for the cost of my studies while I am at INTERLINK. Further, I authorize the release of my credentials and of my medical records for medical and insurance purposes; I also authorize treatment of any illness or injury by qualified health personnel.

Signature of student or sponsor

Date

III. FAMILY MEMBERS If family members will accompany you to the United States, you must provide complete and accurate information for each one. If family members will not accompany you, do not fill out this page.

Spouse

Family Name First Name
Name must be spelled exactly as it is on passport. If possible, send us a copy of the passport.

Date of birth: _____
Day Month Year
The date of birth must be the same as on the passport.

Country of birth: Country of citizenship:

Child 1

Family Name First Name
Name must be spelled exactly as it is on passport. If possible, send us a copy of the passport.

Date of birth: _____
Day Month Year
The date of birth must be the same as on the passport.

Country of birth: Country of citizenship: Gender: Male Female
(circle one)

Child 2

Family Name First Name
Name must be spelled exactly as it is on passport. If possible, send us a copy of the passport.

Date of birth: _____
Day Month Year
The date of birth must be the same as on the passport.

Country of birth: Country of citizenship: Gender: Male Female
(circle one)

Child 3

Family Name _____

First Name _____

Name must be spelled exactly as it is on passport. If possible, send us a copy of the passport.

Date of birth: _____

Day

Month

Year

The date of birth must be the same as on the passport.

Country of birth: _____

Country of citizenship: _____

Gender: Male Female

(circle one)

Child4

Family Name _____

First Name _____

Name must be spelled exactly as it is on passport. If possible, send us a copy of the passport.

Date of birth: _____

Day

Month

Year

The date of birth must be the same as on the passport.

Country of birth: _____

Country of citizenship: _____

Gender: Male Female

(circle one)
