



APPLICATION

1. Please complete and sign this application form. Your application cannot be processed without the following:
 - a. A non-refundable application fee of US\$60
 - b. A refundable housing deposit of US\$250 in the form of a credit card or debit card guarantee, if you require housing.
 - c. A non-refundable express courier fee of US\$55 if you require express courier service for your visa application.
 - d. A letter of financial support if you require a visa. This should be in the form of a letter from your bank or a letter of guarantee of financial support and a bank letter (or scholarship letter) from the person, employer, or organization that will sponsor you. Your letter of financial support must indicate that you, or your sponsor, have funds of at least US\$4915 available.
2. Please send the completed application by mail, fax, or e-mail to:

Mailing Address:

Sacred Heart University
English Language Institute
5151 Park Avenue
Fairfield, CT 06825, USA

Fax:

(203) 365-7500

Email:

monaghanm@sacredheart.edu

We will review your application. Upon acceptance, SHU will send you:

- An Acceptance Packet which contains your SHU Acceptance Letter.
- A Housing Placement Letter and Housing Acceptance Agreement, if you applied for housing.
- An I-20 Form if you applied for a visa. Please note that United States law states that an I-20 can only be issued to students who intend to pursue full-time intensive English language study. If you plan to study in SHU's Intensive Program (full-time), SHU will issue an I-20 for you. Please take the I-20 Form to the United States Embassy or Consulate when applying for your Student Visa (F-1). Please note that United States law does not permit students to study part-time with a F-1 Visa.

REGISTRATION

When you register at SHU, you must bring the following with you:

- Your Passport and your I-20.
- A receipt indicating pre-payment for your housing.
- Proof of existing health insurance if you will not purchase SHU Health Insurance.

PAYMENT

Please note that all fees must be paid in full before the start of your first class. We accept credit cards, debit cards, US\$ traveler's checks, money orders, or bank drafts (drawn on a US\$ account) payable to Sacred Heart University. You may also send a wire transfer.

Please note that a wire transfer must include both the ABA number and the SWIFT code.

Bank Name:

Bank of America

ABA #: 026009593, SWIFT CODE: BOFAUS2N

For credit to: Sacred Heart University

Account #: 00050437779

CANCELLATION & REFUNDS

Cancellation Date:	More than 2 weeks before session starts	Less than 2 Weeks before Session starts	After session starts
Application Fee	0%	0%	0%
Tuition Payment	100%	75%	0%
Housing Deposit Guarantee	100%	50%	0%
Housing Payment	100%	0%	0%

All refunds are given in the same form in which payment was made.

If SHU rejects your application, or cancels a class, a full class refund will be made within 30 days.

HOUSING

You can choose to live in a homestay or an apartment, however, priority is given to full-time students. Please complete the housing application form in full, and we will make all arrangements for you BEFORE your arrival. All students are requested to arrive on the Sunday immediately preceding the start of their first session and to depart on the Saturday immediately following the end of their last session. If special permission is given for extra days, an extra charge will apply.

AIRPORT PICK-UP

We can arrange airport pick-up service for you at a cost of \$145 each way. Please note that there is a \$60 surcharge for airport transfers after midnight and on Thanksgiving, Christmas, New Year's Eve, and New Year's Day.

HEALTH INSURANCE

You must have health insurance while studying in the United States. You may purchase insurance through Sacred Heart University or provide proof (in English) of existing coverage. For additional policy information, please contact Sacred Heart University directly.

APPLICATION DEADLINE

After we receive your application form, we will send you a packet of information, an "Acceptance Packet", which includes your I-20 form (if you have requested one). This material is usually sent by regular mail. However, due to the critical nature of the material enclosed in the package, if your application is received fewer than 45 days before the start of the session for which you have applied, we strongly recommend that you request your "Acceptance Packet" be sent via express courier. If you wish to receive your packet via express courier, you must pay the \$55 courier fee.

CONDITIONAL LETTER OF ACCEPTANCE

If you need a Conditional Letter of Acceptance, please contact our office and we will be happy to provide one.

PERSONAL SPENDING MONEY

We recommend that you plan on spending approximately \$525 per month on personal shopping, entertainment, transportation, etc. Books will cost approximately \$150 per 14-week session.

CLIMATE

Temperature averages are 10°C in spring, 22°C in summer, 13°C in fall, and -1°C in winter. Extremes, however, can range from 37°C in summer to -18°C in winter.

MORE INFORMATION

If you need further information or have questions about any aspect of the English Language Institute at Sacred Heart University, please phone 203-365-7528 or e-mail sheli@sacredheart.edu. We are here to help.

FEES – 4 WEEKS

Application Fee	\$60
Housing Deposit Guarantee	\$250
Express Courier Fee	\$55

	Intensive Program	Semi-Intensive
Tuition	\$2415	\$1890
Application Fee	\$60	\$60
Total	\$2465	\$1950

Have you taken the TOEFL English Test or any other English Placement test? Yes No

Test Information:

Name of Test

Date Taken:

Score

Do you need a student (F-1) visa? Yes No

Do you already have a student visa? Yes No Do you wish to transfer that visa from another school? Yes No

Do you already have a United States visa and you wish to change your visa status? Yes No

I plan to attend the Semi-Intensive Program (18 hours per week) Intensive Program (23 hours per week)

I plan to attend the Stamford campus Fairfield Campus

Sponsorship Information:

Name of Sponsor Organization

Name of Sponsor or Academic Advisor Information

Sponsor ID number

Sponsor Phone Sponsor Email

Will you have a dependent that will be traveling with you? Yes No (Please enclose copies of passports of all dependents)

Dependent Information

Name

Date of Birth (Month/Day/Year)

Country of Citizenship

Dependent Information

Name

Date of Birth (Month/Day/Year)

Country of Citizenship

Dependent Information

Name

Date of Birth (Month/Day/Year)

Country of Citizenship

If you have more dependents, please attach to a separate paper.

- Yes. I want to purchase health insurance from SHU. I understand that insurance costs \$17 per week
- No. I do not want to purchase health insurance from SHU. I have my own.

- Yes. Please arrange airport pick-up service for me. I understand that this service costs \$145. I understand I need to pay for this in advance.
- No. Please do not arrange airport pick-up service for me.

- Yes, I want help getting a mobile phone when I arrive.
- Yes, I want help opening a bank account when I arrive.

In case of emergency, whom should SHU contact?

Name _____ Relationship _____
 Telephone _____ Email _____

Please tell us your current profession.

Please tell us how you found out about us.

What would you like to study after ESL? Undergraduate Graduate **Major:** _____
Do you have a bachelor's degree? Yes No **Major Studied:** _____
 Have you completed a credit evaluation: Yes No

Please send my Acceptance Packet (including my I-20 form if I applied for one)

- via express courier (I have enclosed \$55 for this service)
 - via air mail (no charge)
 - to the permanent address above, or
 - to a different address:
- Street Address _____
 Street Address _____
 City _____ State _____
 Country _____ Postal Code _____

PAYMENT INFORMATION

I have paid my fees with a bank transfer.
 Date transfer sent: _____ Transfer Amount \$ _____ Transfer Reference # _____
 (Day/Month/Year) if available

- I would like to pay my fees with a credit card or debit card.
- Please visit our website at www.sacredheart.edu/sheli.cfm to process your credit card payment.

Financial Certification, Housing Deposit Guarantee & Medical Authorization

By signing this form, you are allowing Sacred Heart University English Language Institute to process your application.

Name of Applicant _____ Name of Guardian if under 21 _____
 Signature of Applicant _____ Date _____ Signature of Guardian if under 21 _____ Date _____



SACRED HEART UNIVERSITY
 English Language Institute | ESL Classes
 5151 Park Avenue • Fairfield, CT 06825-1000