



INTERNATIONAL STUDENTS: Concurrent/Transient

This application is for international students who currently have an I-20 issued by a college or university and who are interested in attending St. Philip's College simultaneously or only during the summer.

1 Complete ApplyTexas online:

- www.applytexas.org

2 Complete Concurrent/Transient Application

- Download and print application:
<http://www.alamo.edu/spc/international/>

Complete, sign and mail to:

St. Philip's College
International Student Services-Box 333
1801 Martin Luther King Dr.
San Antonio, Texas 78203

3 Immigration Documents

Submit copies of the following:

- Current and previous I-20
- Visa
- Passport
- Form I-94 www.cbp.gov/i94

4 Official Academic Record

- Submit Official college/university transcripts in a sealed envelope or transcripts can be sent electronically directly from your college/university transcript office

5 \$100 Application Fee

To pay \$100.00 (non-refundable) application fee, go to: [Submit International Application fee](#)

Print receipt and submit with application

6 Bacterial Meningitis Vaccination

Applicants under the age of 22 of age must provide proof of having received the Bacterial Meningitis vaccination before you will be permitted to register for classes.

You may receive the vaccination in your home country or once you arrive in the U.S.

This documentation must be submitted 3 weeks prior to the first day of class.

For additional information, go to:

<http://www.alamo.edu/meningitis/>

7 Authorization Letter

Applicants must provide an official permission letter signed by the international student advisor

8 Passport Photograph

Attach a passport size photograph to the application



Attach
 Passport Size
 Photo

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Student Information

(PLEASE PRINT INFORMATION AS LISTED ON PASSPORT)

Last Name: _____ First Name: _____ Middle Name: _____

Date of birth: ____/____/____ Male _____ Female _____ Visa Type _____ Visa Expiration Date ____/____/____
MM DD YYYY MM DD YYYY

Passport Number: _____ Passport Expiration Date ____/____/____ Country of Citizenship: _____
MM DD YYYY

City & Country of Birth _____ Country of Residence: _____

Email: _____ Telephone: _____

Address in United States:

Street Address: _____

City: _____ State: _____ Postal Code: _____

Admission Information

Term applying for:

Fall (August) 20 _____ Spring (January) 20 _____ Summer (June/July) 20 _____

You are applying as:

- Concurrent (Fall or Spring)
 Transfer (Summer only)

Name of college/university _____

I CERTIFY THE INFORMATION ON THIS APPLICATION IS CORRECT.

 Signature of Student

 Date

OFFICE USE ONLY

Banner ID _____ Visa Type _____ Exp. Date _____

P/DSO _____ Date _____