



International Student Application

Select term: ___ Fall ___ Spring ___ Summer Year _____

Enrollment Status: ___ Initial ___ Transfer ___ Part-Time

OCC ID#: _____

___ Conditional Admission ___ Change of Status

Major: _____

Current Visa Type: _____

Personal Information

Do not include your agent's information here.

Name: _____
Last/Family Name Given Name Middle Name Preferred Name

Date of Birth: _____ Gender: ___ Male ___ Female Primary Language: _____
MM/DD/YYYY

Country of Birth: _____ Country of Citizenship: _____

Email Address (1): _____ Home Country Phone Number: _____

Email Address (2): _____ U.S. Phone Number: _____

Foreign Address: _____
Street Number and Name City/Province Country

U.S. Address (if applicable): _____
Street Number and Name City State ZIP Code

Name of high school attended/attending: _____
Country

Transfer from (U.S. only): _____
City/State

Student Release Information

Authorization for Admission of a Minor: (required if the student is under the age of 18)

I, _____, being the parent or legal guardian of the applicant give my consent for admission and study at OCC as well as medical treatment of this minor, if necessary. I understand that this authorization is valid until the minor applicant reaches his/her 18th birthday.

Parent's/Guardian's Signature Email Address Date

Third Party Authorization (OPTIONAL): if you would like to give permission to OCC to release your information including release of your records and documentation to an agency or individual, please indicate their name(s) and email address(es) below:

Full Name (Agent or Individual) Email Address Date

Certification

I certify that all information provided is correct and that I have adhered to the registration policies as set for in the OCC Catalog.

Student's signature: _____

Date: _____