



**2018 English Language Academy,  
University of San Diego  
General English Application**

**Applicant's Information**

Family Name (Last Name) \_\_\_\_\_

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Date of Birth (MM/DD/YYYY) \_\_\_\_\_

Gender  Male  Female

Country of Birth \_\_\_\_\_

Country of Citizenship \_\_\_\_\_

Country of Permanent Residence \_\_\_\_\_

**Permanent Home Address**

Street & Number \_\_\_\_\_

City, State \_\_\_\_\_

Province (If Applicable) \_\_\_\_\_

Country, Postal Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

Country & City Code Number \_\_\_\_\_

Email Address \_\_\_\_\_

**Emergency Contact Information**

Emergency Contact Name (First & Last) \_\_\_\_\_

Relationship to Applicant \_\_\_\_\_

Telephone Number \_\_\_\_\_

Country & City Code Number \_\_\_\_\_

**Program Dates**

The 2018 course start dates for the General English Program are: January 8, February 5; March 5; April 2; May 7; June 4; July 9; August 6, September 4; October 1; November 5. Please indicate below your desired course start and end date:

<b>Start Date</b> Month:	Day:	Year:	<b>End Date</b> Month:	Day:	Year:
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**Program Fees**

Application Fee (Non-refundable, one-time fee): \$100

Tuition for 4 weeks (includes books): \$1,600.00

In order for your application to be considered, you must submit the non-refundable application fee along with a completed application enrollment form. The tuition fee must be paid in full 10 days prior to the begin date of your program. If you fail to pay the fee in full, you will be ineligible to enroll in and/or to continue with the program. \*The program fees do not include health insurance or housing

**ALL OF THE FEES DESCRIBED ABOVE MUST BE PAID IN FULL 10 DAYS PRIOR TO THE START OF THE PROGRAM.**

**Health Insurance**

By checking this box: I agree to provide my own health insurance, and I will purchase medical/health insurance prior to my arrival to the U.S.A.

Do you have any medical conditions or allergies? Or need special services to accommodate a physical disability?

If so, please describe: \_\_\_\_\_

**Photo Permission**

**Permission to take photographs for University/ English Language Academy publicity:** From time to time, USD requests photographs of ELA events to use in publicity material or on the English Language Academy website or Facebook page.

I give my permission for representatives of the University of San Diego to use my photograph for use in publicity materials about the University or the English Language Academy. My name will not be released without my written consent.

Yes     No

**I certify the information in the English Language Academy application is true to the best of my knowledge.**

**Applicant's Signature:** \_\_\_\_\_

**Date (MM/DD/YYYY):** \_\_\_\_\_

English Language Academy  
University of San Diego  
5998 Alcalá Park  
San Diego, CA 92110  
Tel: 1-619-260-8887  
Email: englishacademy@sandiego.edu

