

INTERNATIONAL STUDENT CHECKLIST



The following documentation is required before we are able to process and issue your I-20:

- Signed **F1 Student Responsibilities** document
- Completed **Financial Statement of Support** document
- Official bank statement verifying a minimum of 1 year of appropriate funds.
 - Designated School Officials (DSOs) must collect evidence of the student's financial ability before issuing a Form I-20, "Certificate of Eligibility for Nonimmigrant Student Status." <https://studyinthestates.dhs.gov/students/financial-ability>
 - An original bank statement must be printed at the bank with the signature and stamp from the bank; bank statements mailed to your residence are not acceptable.
 - Bank statements must be current and dated within the last six months and in U.S. dollars.
- Initial **I-20 Request Form**
- Dependent Request Form** (if applicable)
- Proof of medical insurance with a repatriation clause
- A complete **Transfer Clearance Form** (only for transfer students from a different U.S. institution)
- Photocopies of the visa, biographical page of the passport, I-94 document or print out, all previous I-20s, and Employment Authorization Document if any).
- Completion of Authorization to Release Educational Record Information Student Request Form (last page) - allows the release of student specific educational information to INSOFE.

For additional information contact admissions@walshcollege.edu.

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F-1 STUDENT RESPONSIBILITIES

A person admitted to the United States as an F-1 student must meet certain obligations in order to maintain legal status. Here is an **overview** of USCIS regulations as they relate to F-1 students at Walsh. Walsh has an International Student Advisor/DSO in the Academic Advising Office who can assist you with questions or problems. However, it is **your** responsibility to know and adhere to all USCIS and Walsh College regulations. F-1 students are held to the same policies and procedures as all Walsh College students as this pertains to tuition refunds, financial responsibilities, add/drop policies, and the like, enumerated in the Walsh College Student Handbook and Course Catalog.

Under current USCIS regulations, an F-1 student must do the following to maintain status:

1. Attend the school he or she was authorized to attend (the school that issued the student's I-20). The student must make normal progress towards completing the course of study, by completing studies before the expiration date on the I-20.
2. Carry a **full course of study**. For undergraduate students, a full course of study is 12 or more semester credit hours. For graduate students, a full course of study is 6 or more semester credit hours. Students must pursue a full course of study during every academic session or semester except during official school breaks, or unless approved, in advance, under a specific exception by the Designated School Official (DSO). All students can take only one online class per semester.
3. Apply to the DSO to continue from one educational level to another (e.g. from the bachelor's program to the master's program) at the same school. Students must also notify the DSO when changing from one program to another (e.g. from the accounting program to the finance program).
4. Remain in the U.S. no longer than 60 days after completing the full course of study, unless the student has followed procedures for applying for practical training, an extension or change of program, or school transfer.
5. Have a passport that is kept valid at all times, unless exempt from the passport requirement.
6. Not work off campus unless authorized or work on campus no more than 20 hours during active enrollment
7. Report a change of address to the international student advisor/DSO within 10 days of the change.
8. Fully and truthfully disclose all information requested by USCIS.
9. Obey all federal and state laws.
10. Health insurance must be purchased and must be valid at all times.

Information provided here should not be construed as legal advice. You may want to consult an immigration attorney to see how the law may apply in your situation. It is the **student's responsibility** to notify the DSO of any changes that affect their status.

I, _____, certify that I have read and understand the above statements.
(Print name)

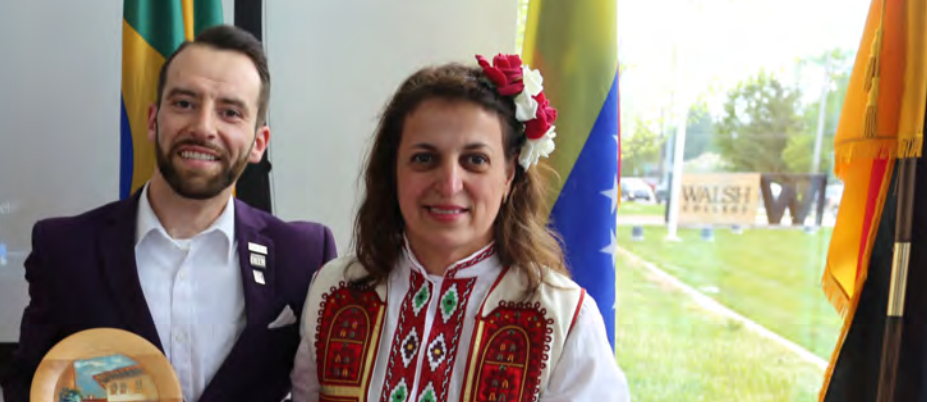
Signature of Student

Date

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INITIAL I-20 REQUEST FORM



Last Name _____

First Name _____

USA Address _____

Home Country Address _____

Email Address: _____

Home Phone Number: _____

Cell Phone Number: _____

Birth Date: _____

City of Birth: _____

Country Of Birth: _____

Country Of Citizenship: _____

Type of Visa: _____ Admission Number (I-94 Number): _____

Expiration Of Passport: _____ Issuing Country: _____

Do you have any dependents that you want included on this I-20: Yes _____ No _____

If yes, please complete the attached form with dependent information.

Semester Start: _____ **Year** _____

Fall _____

Winter _____

Spring _____

Summer _____

Level of Study: Master _____ Bachelor _____

Field of Study (Major): _____

Financial Source: Self _____ Amount _____

Sponsor(s) _____ Amount _____

Signature _____

Date _____

Return this form to the International Student Advisor at the Admissions Office. You must also submit a copy of your visa, passport, I-94 card (front/back), all previous I-20's and a copy of employment authorization (if any).

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I-20 INFORMATION FOR DEPENDENTS OF F1 STUDENT (SPOUSE AND CHILDREN)



F1 Student's Name: _____
Family First Middle

DEPENDENT INFORMATION					
FAMILY NAME	FIRST NAME	DATE OF BIRTH	CITY OF BIRTH	COUNTRY OF BIRTH	RELATIONSHIP TO F1 STUDENT

Signature _____ Date _____

Note: Please attach a copy of the passport, visa, and I-94 (front & back) for each dependent.
Financial backing of \$2,645.00 per dependent is required.



FINANCIAL STATEMENT OF SELF SUPPORT

Student's Name: _____
Family First Former

Student's Address: _____

Phone Number: _____

Email Address: _____

I hereby certify that I have the financial means to support myself while I am a **full time** student at Walsh seeking a _____ degree. Attached is an official **original (faxed or photocopies are not acceptable)** bank statement in English and U.S. dollars that verifies a minimum of one year of appropriate funds in my name.* An original bank statement must be printed at the bank with a signature and stamp from the bank; we cannot accept bank statements that are mailed to your residence. If the bank statement is obtained from out of the country, then it must be notarized and translated. Bank statements must be current and dated within the last six months.

Signature of Student Date

*The current tuition/living expenses for one year are outlined in financial information document in U.S. dollars.

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FINANCIAL STATEMENT OF SPONSORED SUPPORT

Sponsor's Name: _____

Relationship to Student: _____

Sponsor's Address: _____

Phone Number: _____

Email Address: _____

I, the above named sponsor, hereby certify that I will provide full financial support for

Family name

First name

while she/he is a student at Walsh. I understand that the above named student is seeking a _____ degree. I further certify that my net income is adequate to undertake this responsibility. Attached is an official, **original (faxes or photocopies are not acceptable)** bank statement in English and U.S. dollars that verifies a minimum of one year of appropriate funds.* An original bank statement must be printed at the bank with a signature and stamp from the bank; we cannot accept bank statements that are mailed to your residence. If the bank statement is obtained from out of the country, then it must be notarized and translated. Bank statements must be current and dated within the last six months.

Signature of Sponsor

Date

*The current tuition/living expenses for one year are outlined in financial information document in U.S. dollars.

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INTERNATIONAL STUDENT TRANSFER FORM

To Be Completed By the Student:

Student Name: _____

Signature of Student: _____

Date: _____

Walsh will issue your new I-20 after you have been admitted to Walsh and your current school has released your I-20 in the SEVIS system.

To Be Completed By the Current International Student Advisor:

Name and Address of School: _____

Student's SEVIS ID _____ Release Date: _____

While attending your school has the student maintained proper status per USCIS regulations?

Yes _____

No _____

If not, please explain _____

Please indicate whether student has participated in the following:

OPT from _____ to _____ PT or FT

CPT from _____ to _____ PT or FT

Signature of DSO/Advisor _____

Name of DSO/Advisor _____

Title of DSO/Advisor _____

Phone _____ Date _____

Email _____

Please upload completed F-1 documents through admission portal at www.apply.walshcollege.edu/account/login.

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**ITECH MBA
FINANCIAL INFORMATION 2022-23
(Fall/Winter Semester start)**

With your application, you must show evidence of sufficient financial support in the form of original stamped/signed bank document(s) or letter(s). They can be the student's information and/or a sponsor's information. Federal and State financial aid is only available to United States citizens and permanent residents.

The following amounts represent the tuition and fees owed by semester for the ITECH MBA program in addition to approximate living expenses needed for the student to pursue their academic endeavors. Tuition and fees reflected below are for enrollment in Walsh College courses in fall 2022 through summer 2023 semesters. Any tuition and fee increases will apply for fall 2023 semester and future semesters.

Breakdown of Sufficient Financial Support Needed

Semester 1 Tuition and Fees:

Tuition for coursework in India – Due two weeks after admission	\$13,050.00
Enrollment in MGT 502 - Due October 27, 2022 (if required, completed concurrently online)	\$ 2,827.00

Semester 2 Tuition and Fees – Due by February 2, 2023
(First semester in residence at Walsh) \$ 7,731.00

Semester 3 Tuition and Fees – Due by April 27, 2023
(Second semester in residence at Walsh) \$ 7,731.00

Semester 4 Tuition and Fees – Due by August 3, 2023
(Internship) \$ 2,577.00

Semester 5 Tuition and Fees – Due by October 26, 2023
(Internship) \$ 2,577.00

Living expenses for one year \$15,771.00

Total Financial Support Needed: \$52,264.00

Dependent additional Cost of Living – if applicable (per dependent): \$ 2,645.00

Authorization to Release Educational Record Information Student Request Form



Privacy of personal information is paramount in the minds of many citizens. Walsh takes the protection of students and their records very seriously, and therefore, complies with The Family Educational Rights and Privacy Act of 1974 (FERPA) to protect the privacy of student records. The Family Rights and Privacy Act allows release of "Directory Information" without the student's prior consent. Walsh defines the following categories as directory information and **may** permit disclosure without the written consent of the student:

- Name
- Graduation information including degree earned, major, specialization, certification, honors, awards received and/or date of graduation
- Home address
- Dates of attendance
- Phone numbers
- Photographs
- Current or past enrollment status
- Walsh email address
- Academic program/degree
- Honors recognition
- Participation in officially recognized activities

Except to the extent that FERPA authorizes disclosure without consent, personally identifiable information contained in the student's educational record not listed as "directory information" will not be disclosed without the prior written consent of the student.

_____ Date _____ Student ID# _____ Student Name

This information can be:

- Business Office/Account Balance Information
- Class schedule/registration
- Enrollment status
- Financial Aid
- Other: _____
- Any and all of my educational record

I want this individual to:

- Only obtain information
- Conduct business on my behalf
- Obtain information **and** conduct business

This is only valid for these semester(s):

- Fall 20____
- Winter 20____
- Spring 20____
- Summer 20____
- Each semester I'm enrolled in courses

Provide the person's name that this can be released to and PIN that can be used to verify their identity:

_____ First Name _____ Middle Initial _____ Last Name _____ Unique Four-Digit PIN

Authorization: I give Walsh permission to release the selected information to the individual listed above. I also understand that a Walsh representative will ask for the PIN **before** this individual can do official business on my behalf.

Signature: _____ Date: _____

Records & Registration
3838 Livernois Road, Troy, MI 48083
FAX 248-823-1662