

Postgraduate Certificate Program Application Form

Please print or type. **Mail or fax (530-752-4361) this form and application materials to:**

Donna Maricich, Program Coordinator; Plant Sciences – Mail Stop 1
University of California; One Shields Avenue; Davis, CA 95616-8515 USA

Date of Application: _____

Title of Certificate: _____

Host Department: _____

Desired Commencement Date and Duration: _____

Name of Applicant: _____
(Last) (First) (Middle)

Current Occupation: _____

Country of Birth: _____ Country of Citizenship: _____

Address: _____
(Number & Street)

(City) (State) (Zip)

Telephone: _____
() () ()
(Home) (Business) (Message)

E-mail: _____

Where can you be contacted during the application process? _____

EDUCATIONAL BACKGROUND:

Institution/Location

Area of Study

Degree Years

STATEMENT OF PURPOSE: (Provide a brief summary of your background and what you hope to gain from this program. An additional sheet of paper may be used.)

Who have you contacted in the department? _____

Who has agreed to serve as your faculty host/advisor? _____

ENGLISH COMPETENCY:

(Rate your skill in each category as excellent, good or fair.)

Listening: _____ Speaking: _____ Written: _____

Is English your native language? Yes No

Test of English as a Foreign Language (TOEFL) is required if English is not your native language.

http://www.ets.org/portal/site/ets/menuitem.fab2360b1645a1de9b3a0779f1751509/?vgnextoid=69c0197a484f4010VgnVCM10000022f95190RCRD&WT.ac=Redirect_ets.org_toefl

Have you taken the TOEFL? Yes Score _____ No

- Please have TOEFL forward a copy of your test results to the International Programs Office.
- To understand the TOEFL English Proficiency requirement for UC Davis, please refer to <http://registrar.ucdavis.edu/UCDWebCatalog/admission/international.html>.

TOEFL (609) 951-1100
Educational Testing Service
P.O. Box 6151
Princeton, NJ 08541-6151

ACADEMIC PLAN AND GOALS:

(Indicate your program objectives, desired course of study, anticipated start date, anticipated completion date, and other goals.)

LETTERS OF SUPPORT: (Provide letters of recommendation or the names, addresses (including e-mail), and telephone/FAX numbers of three people who can comment on your academic and professional qualifications. It is the applicant 's obligation to ensure that these letters can be obtained promptly.)

DECLARATION: I hereby acknowledge that the University of California, Davis makes no pledge to provide funding of any kind to support this application or course of study.

Signature: _____

Date: _____

I. ENROLLMENT OF INTERNATIONAL PARTICIPANTS

Non-United States citizens/non-United States (U.S.) permanent residents

International participants in the CA&ES Postgraduate Certificate Programs may choose one of two options.

OPTION 1

Participants will enter the U.S. for the sole purpose of participating in a CA&ES Postgraduate Certificate Program. In most cases, they will enter the country on an F-1 student visa. However, for participants who are sponsored by their home governments, the J-1 student visa may be more appropriate.

This option **requires full time, continuous enrollment, (12 unit hours each consecutive quarter, including summer) until completion of the program. Students may be enrolled for less than 12 units in the final quarter if fewer than 12 units are required for completion of the program.**

Option 1 applicant, please complete **Section III. Visa Information** on Page 4 of 6.

OPTION 2

An individual who comes to UC Davis as a visiting scholar to pursue a research program hosted by a sponsoring professor in a UC Davis academic department may choose to enroll in a Postgraduate Certificate Program as an activity incidental to his or her primary research activity. Such individuals would apply under Option 2.

They would be expected to **participate in the research activity for at least 20 hours per week and enroll in the postgraduate certificate program on a part-time basis, taking courses of up to 8-unit hours per quarter.** The host professor must approve participation in the Postgraduate Certificate Program.

In most cases, those who choose this option would enter the U.S. as J-1 Exchange Visitor research scholar and the host academic department would facilitate the visa document directly with Services for International Students and Scholars. Option 2 applicants **do not complete** Section III on Page 4 of 6.

II. U.S. IMMIGRATION

As mentioned above, most international participants in the Postgraduate Certificate Program will enter the U.S. on either an F-1 Student visa or J-1 Exchange Visitor visa.

Citizens of some countries may qualify to enter the U.S. without a visa on the Visa Waiver Program, which allows for entry of only 90 days for the purpose of tourism or business. It is **not** possible to extend the stay beyond 90 days. Participants in the Postgraduate Certificate Program should **not** enter the U.S. on a visa waiver.

Additional information about applying for a U.S. visa and about U.S. Immigration and Naturalization Service requirements will be provided directly to those applicants who are approved for enrollment in the Postgraduate Certificate Program. Visa documents will also be provided at that time.

III. VISA INFORMATION – TO BE COMPLETED BY OPTION 1 APPLICANTS

Upon receipt of the following information and confirmation of your acceptance into the CA&ES Postgraduate Certificate Program (PGCP), your Certificate of Eligibility will be prepared by [UC Davis Extension](#) for the F-1 visa (I-20) or by [Services for International Students and Scholars](#) for the J-1 visa (IAP-66) and send it with helpful pre-arrival information to the prospective student.

Type of visa document requested: I-20 (F-1 Student visa)
 IAP-66 (J-1 Exchange Visitor visa for government/agency sponsored students only)

1. Name _____
 (as it appears on passport) family/last first/given middle
2. Date of birth _____ Place of birth _____ Male _____ Female _____

 (mm/dd/yyyy) city/country
3. Country of Birth: _____ Country of Citizenship: _____
4. Position title in home country _____ Home institution _____
5. Highest academic degree _____ Specialized field _____
6. Proposed dates of participation in the CA&ES PGCP _____ to _____

Family Information

Please complete this section if family members will accompany you to the U.S. Immediate family members only (spouse and unmarried children under age 21) are eligible for F-2 or J-2 dependent status.

<u>Name of Family Member</u>	<u>Date of Birth</u>	<u>Country of Birth</u>	<u>Relationship</u>
(Family / last name, first/given name, middle name)			

IV. U.S. VISA HISTORY

1. Are you currently in the U.S.? Yes _____ No _____
 If yes, please indicate your current immigration status.
2. Will you be leaving the U.S. and returning before you begin the Postgraduate Certificate program?
 Yes _____ No _____
3. Please attach photocopies of all current and/or previous visa documents including Form I-94s IAP-66s I-20s EAD cards and/or H-1B approvals.

IV. VERIFICATION OF FINANCIAL SUPPORT

Prior to the issuance of visa documents, international participants must document the source and amount of financial support they will have while in the U.S. In addition to the cost of course fees and administrative fees, the required minimum support for living expenses is \$1,600 per month for the Postgraduate Certificate Program participant, \$420 per month for an accompanying spouse, and \$210 per month for each accompanying child. This does not cover estimated costs for health insurance and childcare expenses. Minimum health insurance coverage costs approximately \$163 to \$328 per month for a spouse and \$75 to \$225 per month for one or more children Full-time childcare costs can exceed \$800 per month.

Please complete the following and **attach written documentation of financial support in English and U.S. dollars** for the entire period of participation in the Postgraduate Certificate Program. Acceptable documentation of financial support may include bank statements, letters from sponsors or employers.

Estimate of expenses*:

- a) Course Fees: \$2,400 per quarter \$ _____
- b) Living expenses: \$1,600 per month @ _____ months \$ _____
- c) Remember to account for *additional expenses
 - TOEFL exam \$140 - \$175
 - Program's "Administrative Fees"
 - In-country visa application fee of \$100
 - One-time administrative fee of \$325
 - Minimum health insurance costs of \$140
 - One-time application fee of \$50\$ _____
- Total estimated expenses for the entire CA&ES PGCP** **\$ _____**

Documented financial support:

- a) Personal Funds \$ _____
- b) Applicant's home government \$ _____
- c) Other (specify): _____ \$ _____
- Total funding for the entire CA&ES PGCP** **\$ _____**

