



American English Program

Intensive English Program Application 2017

A. Personal Data

Please type or print legibly.

1. Name _____
(as it appears on passport) Last / Family First Middle

2. Permanent: _____
Address Number & Street City Postal Code Country

3. Mailing: _____
Address Number & Street City Postal Code Country

4. Birth date: _____ 5. Gender: ☐ Female ☐ Male
Month / Day / Year

6. Preferred Phone: _____ 7. 2nd Phone: _____

8. E-mail Address: _____ 9. Skype: _____

B. Session Dates:

Please mark an X in the box next to each session you plan to attend.

Spring 2017 (16 weeks)	Summer 2017 (12 weeks)	Fall 2017 (14 weeks)
<input type="checkbox"/> I: 17 Jan – 10 March	<input type="checkbox"/> I: 22 May – 30 June (6 wks)	<input type="checkbox"/> I: 11 Sept – 27 October
<input type="checkbox"/> II: 20 March – 12 May	<input type="checkbox"/> II: 3 July – 11 Aug (6 wks)	<input type="checkbox"/> II 30 Oct – 15 December
<input type="checkbox"/> Flex start* (list): _____	<input type="checkbox"/> Flex start* (list): _____	<input type="checkbox"/> Flex start* (list): _____

*Flex start dates: can be no later than four weeks after the Part I or Part II session start date. Flex start dates are for late arrival to the U.S. and students must start on the scheduled start date, or if late on the first Monday after arrival to U.S.

C. Other Information

1. Country of Citizenship: _____

2. Country of Permanent Residence: _____

3. Passport number: _____

4. Do you need our assistance to find housing?*

☐ Yes ☐ No If yes, approx. arrival date __/__/__

5. If yes, please check the housing desired

☐ Homestay/Hostel ☐ Dormitory (limited availability)

*Please email learnenglish@njcu.edu about housing needs. NJCU does not arrange outside housing but can recommend a hotel, hostel, or homestay agency.

D. Emergency Contact Person

Name: _____ Relationship: _____

Address: _____
Number & Street City, State Postal Code Country

E-mail Address: _____ Telephone: _____

American English Program
Professional and Lifelong Learning
New Jersey City University
2039 Kennedy Boulevard, Prof Room 422
Jersey City, NJ 07305 USA

**Questions? Email: learnenglish@njcu.edu,
 call +1.201.200.3423, or Skype message us
 at njcu.learnenglish**

If referred by an overseas agency please list here:

Agency: _____

Counselor name: _____

FOR OFFICE USE ONLY

Program: AEP at NJCU Amount Paid: _____

Date: _____ Initials: _____

E. Educational Data

Please list in reverse chronological order all high schools, colleges, or universities attended (list most recent first).

High School / College / University / Other	Enrolled Month/Year	Left Month/Year	Currently Enrolled?	Type of degree received	Graduation Date
	/	/			
	/	/			
	/	/			
	/	/			

* For conditional admission to a degree program, please submit official transcripts of all secondary and post-secondary work completed. All foreign transcripts must be evaluated by World Education Services www.wes.org or Span Tran www.spantran.com or another NACES agency (National Council of Credential Evaluation Services www.naces.org). Students who have completed post-secondary study should request a course by course evaluation listing individual subjects & grades. For assistance with NJCU admission, contact us or visit www.njcuinternational.com or for the AEP <http://www.njcu.edu/admissions/international-students/learn-english-njcu>.

F. Academic Interest

Are you applying for conditional admission to an undergraduate or graduate degree program at NJCU?

☐ YES

☐ NO

If "YES," what undergraduate or graduate program do you wish to pursue at NJCU after completing the AEP:

Please see the list of NJCU Colleges and Majors at <http://www.gonjcu.com/majors-and-programs/>

I will pursue an undergraduate / graduate degree program at NJCU (circle one)
College (for example: School of Business):
Major (for example: Business Marketing B.S.):

G. How did you hear about the American English Program at NJCU?

- ☐ Friend or relative ☐ Print advertisement; list here: _____
- ☐ Former NJCU student ☐ Educational Agency, list here: _____
- ☐ NJCU Website ☐ Study abroad website; list here: _____
- ☐ Internet search
- ☐ Other (please explain): _____

H. Signature of student or parent

Signature: _____ Date: _____

Parent/guardian must co-sign if student is under 18 years of age.

Name of parent/guardian: _____ Relationship to student: _____

Signature of parent/guardian: _____ Date: _____

Please scan and email
your application with
supporting documents to:
learnenglish@njcu.edu
or jshafer@njcu.edu

Or express mail your application and supporting documents to:
Jim Shafer, Director, American English Program
New Jersey City University, Office of Global Initiatives
2039 Kennedy Boulevard, Professional Studies Suite 414
Jersey City, NJ 07305 USA Tel: +1.201.200.3423