

☐ Proof of Health Insurance coverage

## **INTERNATIONAL STUDENT APPLICATION FOR ADMISSION**

Social Security Number		MCC Office	use only
Namo			
Name:Family Name/Surname	First/Given Name	Middle Name	Previous Name
Address:			
,	State/Providence	Country	Zip/Postal Code
Home Phone:	Em	ail:	
Country of Birth: Countr		try of Citizenship:	
Check the semester for which you are ap	plying?	Year:	
PERSONAL INFORMATION			
Date of Birth:	Se	ex: Male Female	
Race/Ethnicity:			
Describe your education goal while at M	CC:		
University Transfer - Majoring in:			
Associate of Applied Science Degree/Cert	ficate:		
NOTE: To be admitted to MCC, students from no of 61 on the TOEFL or minimum score of 95 on		t demonstrate English language	proficiency with a minimum score
High School Name:			
		Month Way of Completion	
City/Country		nth/Voor of Completions	
City/Country:		nth/Year of Completion:	
City/Country:  Name of College/University Attended in	Mo	nth/Year of Completion: City/Stat	
	n the US	·	e
Name of College/University Attended i	n the US  n the US  all questions are correct and coll official Meridian Community	City/Stat  City/Stat  Display to the best of my kno  College publications. I further	wledge. I agree to abide by the agree that as a condition of
Name of College/University Attended in Name of College/Un	all questions are correct and coll official Meridian Community unity College's drug, alcohol, a	City/Stat  City/Stat  Dispression of the best of my knoth college publications. I further nd tobacco-free policies.  Signature of Applicant - Elect	wledge. I agree to abide by the agree that as a condition of
Name of College/University Attended in Name of College/Un	all questions are correct and coll official Meridian Community unity College's drug, alcohol, a	City/Stat  City/Stat  Dispression of the best of my knoth college publications. I further nd tobacco-free policies.  Signature of Applicant - Elect	wledge. I agree to abide by the agree that as a condition of
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Meridian Community College does not discriminate on the basis of race, color, national origin, sex, disability, religion, or age in admission or access to, or treatment or employment in its programs and activities. Compliance with Section 504 is coordinated by The Office of Student Affairs, 910 Highway 19 North, Meridian, MS 39307. Email: 504Compliance@meridiancc.edu. Compliance with Title IX is coordinated by Mr. Derek Mosley, Social Science Instructor, 910 Highway 19 North, Meridian, MS 39307. Email: Derek.Mosley@meridiancc.edu.