ADMISSIONS SUPPLEMENT
TO BE COMPLETED BY APPLICANTS WHO ARE NOT UNITED STATES CITIZENS

Before an application for admission of a student who is not a citizen of the United States can be considered, the following must be submitted to the Admissions Committee:

1. TOEFL (Test of English as a Foreign Language) scores (institutional code 8751);
2. G.R.E. (Graduate Records Examination) scores (institutional code 3533).

Upon admission and prior to registration the following must be submitted to the Director of Admissions:

1. This form fully completed and signed by the applicant;
2. A letter from a sponsor in the United States stating willingness to maintain full financial responsibility for the student during his/her time of study at the Institute or an official copy of the student’s bank statement verifying enough funds for educational and living expenses for the duration of one year;
3. If the applicant is a priest or religious, a statement must be provided from a pastor of a local parish or a superior of a local house verifying that the student has permission to reside in the parish or religious house during their time of study at the Institute.

Full Name
__________________________________________________________
(Last) ___________________________ (First) ___________________________ (Middle) ___________________________

Permanent Home Address
___________________________________________________________________________________________
___________________________________________________________________________________________

Local address in the Washington area:

Street: __________________________________________________________
City: ___________________________ State: _____ Zip code: ______________

Telephone: ______________________________________________________

Place of Birth: ____________________________________________________
City: ___________________________ State: _____ Country: ______________

Date of Birth ___________________________ month/day/year

Citizenship ______________________________________________________ Visa No. ______________________ (if available)
Lay (_____ married _____ single _____ widowed _____ separated)

Diocesan Clergy (specify diocese, name & address of bishop)

Religious (specify community, province, name & address of superior)

Does your community have a house in the United States? ______

If so, please specify the name & address of the local superior.

Do you have health insurance? Yes No (Circle one)

If so, what kind? ______________________________ Carrier ______________________________

Please indicate the person who will be financially responsible for you during your stay in the United States.
Name:_____________________________________________________________________________________
Address:____________________________________________________________________________________

Telephone:________________________________________ E-mail:_____________________________________

Financial Statement: (Necessary for completion of I-20 form)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tuition</td>
<td>$16,500</td>
</tr>
<tr>
<td>Estimated fees/Books</td>
<td>$1,000</td>
</tr>
<tr>
<td>Living expenses (minimum)</td>
<td>$10,000</td>
</tr>
<tr>
<td>Health insurance (approximate)</td>
<td>$1,425</td>
</tr>
<tr>
<td>Total</td>
<td>$28,925</td>
</tr>
</tbody>
</table>

Please note that the amount of money that the applicant is planning to provide must match or exceed the total amount that has been calculated that will be needed for one academic year.

Signature_________________________________________________________ Date____________________