

If you intend to register for courses at North and keep your SEVIS record at your current US school, please fill out the **Concurrent Student Form**. This form along with any required documents for review must be submitted by the intended quarter's **application deadline**. Send this form and required documents to North International Admissions.

Email: NAdmissions@seattlecolleges.edu

Required Supporting Documents:

- \$50 USD Application fee (non-refundable)
 - If you attended NSC, please provide Student ID Number (SID): _____
 - App fee waived for North Seattle returning/alumni students.
- Copy of passport
- Proof Of English proficiency: <https://intl.seattlecolleges.edu/english-proficiency>
- Copy of current I-20 (All 3 pages)
 - If you attended any WA state school, please provide Student ID Number (SID): _____

- ❖ If you have a Social Security Number, please call (206) 934-4680 or email NAdmissions@seattlecolleges.edu.
 - Your Social Security Number may be attached to your SID.

TO BE COMPLETED BY STUDENT

SURNAME/LAST NAME		FIRST NAME/GIVEN NAME	MIDDLE NAME
DATE OF BIRTH: (MM/DD/YYYY)	Gender: (Please circle) Male Female Other		Country of Citizenship:
CURRENT US SCHOOL:	EMAIL:		
INTENDED QUARTER AND YEAR: (Circle quarter)			
Fall (Starting September) Spring (Starting April)	Winter (Starting January) Summer (Starting June)	Year:	
Home country street address:	City:	State:	Postal code:
Country:	Phone Number:		
US street address:	City:	State:	Postal code:
US Phone Number:	Major:	Class Name:	Item Number:

All concurrent application materials can be sent to IP Admissions via email. Once all required concurrent application materials are submitted and accepted, an email will be sent including information on how to register for classes.

Medical insurance is automatically added to tuition for on campus classes.

As a concurrent student, you are ineligible for the insurance at North.

You may request the insurance fee to be removed AFTER you have registered for your classes at NSC.

Please email IP Associate Director Amanda Fletcher at Amanda.Fletcher@seattlecolleges.edu to get the insurance fee removed.

Signature of student _____ Date _____