



**LARAMIE COUNTY  
COMMUNITY COLLEGE**  
WYOMING

**International Student Application Requirements**

- International Student Application for Admission
- Provide Official transcript evaluations from each secondary/high school and college attended. These must be evaluated through a National Association of Credential Evaluation Services (NACES) member organization. For international college transcripts, students must have their transcripts translated and evaluated on a course-by-course basis. NACES approved evaluation companies can be found online at [www.naces.org](http://www.naces.org).
- Submit official scores from TOEFL, IELTS, or Duolingo, if required. See TOEFL/IELTS webpage at <http://lccc.wy.edu/admissions/international/TOEFL.aspx> for further information.
- Complete the Confidential Financial Statement in this application and provide an original bank letter showing cash availability and/or letter of sponsorship. No photocopies of financial verification documents will be accepted. The form must be completed with the student's and sponsor's signature.
- Complete the International Student Health Statement.
- Attach copy of Passport ID page. Students transferring within the U.S. must also submit a copy of their visa, I-94 card, and current I-20.
- If you intend to live on campus, submit the housing application online through myLCCC. This can only be done once you have been admitted. The Residence Halls fill quickly, so apply early.
- Provide proof of International Student Health Insurance. This must be active as of the date you will arrive in the United States and continue through your entire time here.

Submit all materials to: Laramie County Community College  
Office of the Registrar  
1400 E. College Drive  
Cheyenne, WY 82007



# LARAMIE COUNTY COMMUNITY COLLEGE

## INTERNATIONAL STUDENT APPLICATION FOR ADMISSION

Upload  
or attach  
your photo  
here

**Full legal name in English as it appears on your passport**

Family name \_\_\_\_\_ Given name \_\_\_\_\_ Middle \_\_\_\_\_

Birthdate: \_\_\_\_\_ Sex:  Female  Male Email address: \_\_\_\_\_  
Month Day Year

Home country address:

Street/box number \_\_\_\_\_

City \_\_\_\_\_ Province/territory \_\_\_\_\_

Country \_\_\_\_\_ Postal code \_\_\_\_\_

Phone number \_\_\_\_\_

US address (if available):

Street/box number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Postal code \_\_\_\_\_

Phone number \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
Name Phone

Relationship \_\_\_\_\_ Email \_\_\_\_\_

**I plan to enter LCCC:**  August (Fall)  January (Spring) Year: \_\_\_\_\_

**I plan to transfer to LCCC from:** \_\_\_\_\_

Academic major (write it on this line): \_\_\_\_\_

I will attend classes at:  Cheyenne Campus  Albany County Campus (Laramie)

I plan to live in the Residence Hall (Cheyenne Campus Only):  Yes  No

Country of citizenship: \_\_\_\_\_ Current Visa type: \_\_\_\_\_

Country of birth: \_\_\_\_\_ City of birth: \_\_\_\_\_ Native language: \_\_\_\_\_

Please list high school and all colleges attended in order of attendance:

High school	Location	Date graduated
College(s)	Location(s)	Degree received
		Date received

**I am applying as:**

New freshman (first time at any college)  Returning LCCC student  Transfer student

**How did you learn about LCCC?**  Internet  Student in the USA  Friend  College Fair

Other \_\_\_\_\_

The U.S. Department of Education requests that colleges and universities receiving financial assistance submit enrollment data for certain ethnic groups. Students will not be identified in any reports.

Nonresident Alien

The Disability Support Services (DSS) provides accommodations to students with documented disabilities. Disclosure of a disability is voluntary, and no negative treatment will result if a disability is not disclosed. All information provided to the DSS is confidential, and accommodations are provided only to students who request them.

Do either of your parents have a four-year baccalaureate (bachelor's) degree?  Yes  No

**I have enclosed:**

- Confidential Financial Statement
- Copy of my Passport
- Proof of Health Insurance

- Original Bank Statement
- Health Statement

**I have ordered sent to LCCC:**

- Official Transcript Translation and Evaluation
- Official TOEFL or IELTS Scores

By submitting this application, I hereby certify that this application contains no willful misrepresentation or falsification and that the information given by me is true and complete to the best of my knowledge and belief. I also consent to the collection, retention, deletion, and disclosure of my information solely for the purposes of maintaining accurate student academic records and required reporting. I am aware that should an investigation at any time disclose any misrepresentation or falsification, my application may be rejected or I may be dismissed from Laramie County Community College.

\_\_\_\_\_  
**Student's signature**

\_\_\_\_\_  
**Date**

Laramie County Community College is committed to providing a safe and nondiscriminatory educational and employment environment. The college does not discriminate on the basis of race, color, national origin, sex, disability, religion, age, veteran status, political affiliation, sexual orientation or other status protected by law. Sexual harassment, including sexual violence, is a form of sex discrimination prohibited by Title IX of the Education Amendments of 1972. The college does not discriminate on the basis of sex in its educational, extracurricular, athletic or other programs or in the context of employment.

The College has a designated person to monitor compliance and to answer any questions regarding the college's non-discrimination policies. Please contact: Title IX and ADA Coordinator, Suite 205, Clay Pathfinder Building, 1400 E. College Drive, Cheyenne, WY 82007, 307.778.1144, [NDS@lccc.wy.edu](mailto:NDS@lccc.wy.edu).

This publication is available in alternate format on request. Contact Disability Support Services at 307.778.1359 or [DSS@lccc.wy.edu](mailto:DSS@lccc.wy.edu).



# International Student Confidential Financial Statement

Laramie County Community College  
1400 E. College Drive  
Cheyenne, WY 82007

Every applicant to Laramie County Community College must have sufficient funds to meet his or her educational needs. For this reason, we ask you to complete the following Confidential Financial Statement. This form must be completed before an I-20 form can be obtained for a visa to allow entry into the United States. This is in compliance with the regulations of the United States Immigration and Naturalization Service. This also applies if you plan to transfer to Laramie County Community College from another institution within the United States.

The estimated financial cost for one academic year (9 months) is:

Tuition, books and supplies	
Room and board	
Personal expenses	
Transportation (Does not include travel from home country)	
<b>Total</b> .....	<b>\$19,500</b>

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Name of student applicant: \_\_\_\_\_

Dependents: See reverse

Financial guarantee: State below the amount (in U.S. dollars at the current exchange rate) available per year while you will be in the U.S. Do not include travel funds, anticipated earnings or uncertain funds:

Amount available per calendar year: \$\_\_\_\_\_

This amount is guaranteed by (name of person):\_\_\_\_\_

Relationship to student applicant:\_\_\_\_\_

Statement of guarantor: I hereby state I am willing and able to guarantee the financial support of \_\_\_\_\_ during the entire time of \_\_\_\_\_ (student applicant) his or her studies at Laramie County Community College.

\_\_\_\_\_  
Signature of guarantor Date

Address \_\_\_\_\_  
City State or Province ZIP

Bank verification: This is to certify that the sponsor listed above is financially capable of meeting his or her commitment, and, if the funds are outside of the United States, he or she is permitted to do so under your nation's present regulations.

\_\_\_\_\_  
Signature of bank official Date

Title \_\_\_\_\_

Bank address \_\_\_\_\_  
City State or Province ZIP

Student: If you are receiving a scholarship from your government or from an institution in your country, please attach a copy of the award notice to this form.

Dependent Information: Add \$2,000 for each dependent listed

	NAME	DATE OF BIRTH	SEX	RELATIONSHIP TO APPLICANT
1			<input type="checkbox"/> F <input type="checkbox"/> M	
2			<input type="checkbox"/> F <input type="checkbox"/> M	
3			<input type="checkbox"/> F <input type="checkbox"/> M	
4			<input type="checkbox"/> F <input type="checkbox"/> M	

Total \$\_\_\_\_\_

**Return to: Laramie County Community College  
Office of the Registrar**  
1400 East College Drive, Cheyenne, Wyoming 82007  
307.778.LCCC • 1.800.522.2993  
*lccc.wy.edu*