The Concurrent Enrollment program allows University of California Berkeley faculty to invite international students to study at Berkeley for one or two semesters without applying for admission to a UC Berkeley degree program. The Concurrent Enrollment program is administered by UC Berkeley Extension. The office of International Student Services at UC Berkeley Extension issues the student a Certificate of Eligibility Form I-20 once he or she completes the attached application and pays the required fee(s). The Form I-20, along with how to apply for an F-1 visa information, will be mailed to the student via express courier. The full application review process can take three to four weeks. Applications are reviewed on a rolling basis, in the order they are received, and only complete applications are reviewed.

When class application opens, the student will need to complete the online application for concurrent enrollment, adding requests for each class for which he is applying. The student will receive a bill to pay the course fees online after the 5th week from the semester start date. Please visit http://extension.berkeley.edu/static/studentservices/concurrent/ to learn about the class application and enrollment process. For any additional information, please call the office of International Student Services directly at (510) 642-2564, or e-mail extension-intl@berkeley.edu.

F-1 Requirements

The U.S. federal regulations governing F-1 students require that F-1 students must register and enroll in a full course of study at the beginning of each semester. Full-time varies with respect to the level of education. However, most departments require a minimum of 12 units both at the graduate and undergraduate level. For the most part a student must be studying within the host department. A minority of the student’s coursework may occur in a separate though closely related department with the special permission of the host faculty at UC Berkeley.

Host Department and Procedures

The Concurrent Enrollment program is specially designed to promote reciprocity between UC Berkeley and universities abroad. Consult with your university’s study abroad program first. If you choose to be a study abroad exchange student, please do not use this application. To apply to the Concurrent Program, you must be invited by a UC Berkeley department. Along with an invitation letter (sample on page 4) and a completed application form, you must submit the following 3 items to International Student Services: 1) certification of sufficient funds available to you or to your sponsor for tuition and living expenses; 2) Proof of English language proficiency (see requirements on page 3); and 3) a copy of your passport. Mail the application to: UC Berkeley Extension, International Student Services, 1995 University Avenue, Suite 110, Berkeley, CA 94704-7000.

Fall 2015 application deadline: July 6, 2015
Spring 2016 application deadline: November 20, 2015

UC Berkeley Extension Policy

Health insurance coverage is required of all F-1 students who receive their Form I-20 from UC Berkeley Extension. In addition to the international student fee that will be charged at the time we process your application, the health insurance (if applicable), Cal 1 Card and concurrent enrollment application fees will be billed before the semester starts. Please read http://extension.berkeley.edu/static/studentservices/concurrent/faq/ for additional information. If a student originally invited for one semester is invited to stay for a second semester, he or she must apply to the International Student Services office for a “program extension” 30 days before the last day on the I-20. There will be an Orientation for all international concurrent enrollment students held shortly before the beginning of each semester. Attending this Orientation Session is mandatory. F-1 students are eligible to arrive 30 days prior to the program start date on the I-20 and to stay in the U.S. for 60 days after the program end date. The program start date noted on the I-20 is always the date when instruction begins. Please make a note of it when making travel plans.
1. **PERSONAL INFORMATION** (Please type or print your name clearly, as it appears on your passport.)

FAMILY (SURNAME) (AS IT IS SHOWN ON YOUR PASSPORT)

FIRST (GIVEN) NAME  MIDDLE NAME  PROSPECTIVE LEVEL OF EDUCATION

HOST DEPARTMENT

Gender: □ male  □ female

date of birth:  month/day/year

Street (Permanent Address in home country)

City PROVINCE/STATE (IF APPLICABLE)

Country Postal code

**IMPORTANT:** Your I-20 cannot be delivered to a P.O. Box

PHONE: ____________________________________

E-MAIL: ____________________________________

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2. **FOR WHICH SEMESTER(S) ARE YOU APPLYING?**

- □ SPRING  201______  □ FALL  201______

*Summer coursework is conducted through UCB Summer Sessions. Please contact UCB Summer Sessions for more information: http://summer.berkeley.edu

3. **Educational Background (required)**

University/College______________________________________________________________

Degree______________________________________________________________

Major______________________________________________________________

Completion Date____________________________________________

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4. **VISA INFORMATION**

Are you already in the U.S. or will you enter the U.S. prior to attending UC Berkeley Extension in order to attend another school?

□ Yes  □ No  If no, please skip to section 6.

DATE YOUR PASSPORT EXPIRES:____________________

SEVIS ID NUMBER (IF APPLICABLE): N0________

What visa status were you given at the port of entry?

- □ F-1 (F-1 students please also complete section #4)
- □ OTHER __________
5. F-1 TRANSFER STUDENT
You are currently holding an F-1 status or will be holding an F-1 status when you begin the Concurrent Enrollment Program. Please attach copies of all I-20s, passport, visa and I-94 to this application.

To retrieve your I-94, visit https://i94.cbp.dhs.gov/I94/request.html

From what U.S. educational institution or program will you be transferring to the UC Berkeley Extension?

NAME OF THE INSTITUTION:

NAME OF THE DSO (DESIGNATED SCHOOL OFFICIAL)
PHONE: ____________________________
E-MAIL: ____________________________
LAST DATE OF ATTENDANCE: _____________________

6. PROOF OF ENGLISH FLUENCY
For issuing of the form I-20, sufficient English fluency must be documented. Please indicate below the type of documentation you are submitting with your application.

☐ I HAVE DIRECTED THE EDUCATIONAL TESTING SERVICE (ETS) TO SEND MY TOEFL SCORE REPORT DIRECTLY TO UC BERKELEY EXTENSION. Please remember to indicate our ETS institution code: 9216.

☐ I AM ENCLOSING:
□ TOEFL SCORE REPORT OF AT LEAST 90
□ IELTS 7.0
□ HOST DEPARTMENT WAIVED MY TOEFL REQUIREMENT
□ I HAVE A DEGREE FROM AN ENGLISH SPEAKING UNIVERSITY ________________________________

Full name and location of the institution

7. International Student Fees
All fees are subject to change.

☐ International Application/ Cal1 Card/Concurrent Application Fee, if applying for one semester $575*
☐ if applying for two semesters $950
☐ Health Insurance Fee (for 1 semester) $650
☐ Health Insurance Fee (for 2 semesters) $1300
☐ PLEASE SEND ME A HEALTH INSURANCE WAIVER REQUEST FORM

You will receive a bill via e-mail along with instructions to pay online. Upon receipt of your payment, we will mail you a Certificate of Eligibility Form I-20 and the information about how to apply for an F-1 visa.

*NOTE: If you cancel your application, $200 is non-refundable. If you cancel before the semester starts you will be refunded the Cal1Card and Concurrent Application Fee ($375) and the health insurance fee ($650 per semester) if applicable.

8. CHECKLIST
☐ completed application form
☐ letter of invitation (example: Page 4)
☐ passport page with photo and expiration date
☐ financial statement and certification (page 5)
☐ documentation of satisfactory English fluency

9. APPLICANT SIGNATURE
I hereby certify under the penalty of perjury that the above and enclosed information is to the best of my knowledge true and correct.

____________________________________________
SIGNATURE     DATE
TO THE PROFESSOR OR DEPARTMENT CHAIR: PLEASE WRITE YOUR INVITATION ON THE DEPARTMENTAL LETTERHEAD WITH A PROPER SIGNATURE AT THE BOTTOM. IF THE DEPARTMENT WISHES TO WAIVE THE TOEFL, IT MUST BE STATED IN THE LETTER.

MAIL THE LETTER TO: UNIVERSITY OF CALIFORNIA, BERKELEY EXTENSION, INTERNATIONAL STUDENT SERVICES OFFICE
1995 University Avenue, Suite 110
Berkeley, CA 94704-7000

Date_______________________

To the International Student Services:

This letter of invitation acknowledges that _____ Name of the student _____ is eligible to enroll in the graduate OR undergraduate (must specify) courses in the _____Name of the campus department_____ through the Concurrent Enrollment Program of UC Berkeley Extension for the spring and/or fall semester of (must specify the term and the year). <Campus dept> agrees to allow the student to enroll in a full course load of classes in our department, or has made arrangements with <other departments for the student> to comprise a full course load.

As an international student, _____ Name of the student _____ must adhere to and be held responsible for any Department of Homeland Security rules and regulations pertaining to a full-time F-1 international student. It is the student's responsibility to obtain the approval of the instructors, to meet all of the deadlines and departmental requirements, to apply for courses, to monitor application status, and follow-up with application reviewers at all levels to assure enrollment. Our department's full-time load requirement is _____ # _____ units, and our department will work with the student to ensure that the student is able to enroll in a full-time course load.

If there are any questions regarding this invitation, please contact me at _____Name of the campus department, phone number and the time to be reached._____

Sincerely,

_____Name, Title and Signature of the Professor or Department Chair_____


To receive an I-20 and to apply for an F-1 Student Visa, you must complete a statement of financial responsibility or have your bank issue a separate statement that the information is true and correct. You must demonstrate that sufficient funds are available to you to cover the cost of living and tuition. If you are sponsored or receive an educational loan, attach an official letter from your sponsoring institution detailing the amount of the student’s expenses for which the institution is taking the responsibility. NOTE: if family members will be accompanying the student to the U.S., please add to this total estimate $600 per month for the student’s spouse and/or $400 per month for each of the student’s children. All amounts in US$.

<table>
<thead>
<tr>
<th>Length of invitation to study</th>
<th>Estimated living expenses</th>
<th>Application, registration and course fees</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall or spring only</td>
<td>$7,500</td>
<td>$9,335</td>
<td>$16,835</td>
</tr>
<tr>
<td>Fall and spring</td>
<td>$15,000</td>
<td>$18,470</td>
<td>$33,470</td>
</tr>
</tbody>
</table>

10. **Statement of financial responsibility**

I certify that funds in excess of ___________ are available to me or to my institution, and that I or my institution will hereby accept financial responsibility for this student, ___________ over the projected course of study at the University of California Berkeley Extension from ________ to ________.

NAME OF FINANCIALLY RESPONSIBLE PARTY

RELATIONSHIP TO STUDENT

SIGNATURE DATE

Name of financially responsible institution

NAME OF OFFICER

SIGNATURE OF OFFICER DATE

Certification of sufficient funds: This is to certify that the above signed individual has at least the amount indicated above in holdings with our bank.

NAME OF BANK OFFICIAL DATE

TITLE AND SIGNATURE OF BANK OFFICIAL

OFFICIAL BANK SEAL OR STAMP
FEES AND CALENDAR

For courses with lab, an additional $100 is charged (see "with lab fees" below). Please note that the fees may be subject to change.

- 1 unit course: $730 (with lab $830)
- 2 unit course: $1,460 (with lab $1,560)
- 3 unit course: $2,190 (with lab $2,290)
- 4 unit course: $2,920 (with lab $3,020)

- You will receive an invoice for each class to which you applied that is 'submitted to instructor' or that has an 'Approval Completed' status
- Pay online or by check payable to UC Regents (A $25 charge is assessed for returned checks)
- For wire information, please contact extension-intl@berkeley.edu

FALL SEMESTER 2015

**Class application opens** – August 3, 2015
Semester begins Wednesday, August 19, 2015

**Instruction begins (also I-20 start date)** Wednesday, August 26, 2015

**Academic and Administrative Holiday** Monday, September 7, 2015

**Deadline to apply/add/drop classes** Friday, September 25, 2015

**Academic and Administrative Holiday** Wednesday, November 11, 2015

**Academic and Administrative Holiday** Thursday-Friday, November 26-27, 2015

Instruction ends Friday, December 11, 2015

Final examinations December 14-18, 2015

**Fall semester ends** Friday, December 18, 2015

SPRING SEMESTER 2016

**Class application opens** – TBT

Semester begins Tuesday, January 12, 2016

**Academic and Administrative Holiday** Monday, January 18, 2016

**Instruction begins (also I-20 start date)** Tuesday, January 19, 2016

**Academic and Administrative Holiday** Monday, February 15, 2016

**Deadline to apply/add/drop classes** Friday, February 19, 2016

**Spring recess** March 21-25, 2016

Instruction ends Friday, May 6, 2016

Final examinations May 9-13, 2016

**Spring semester ends** Friday, May 13, 2016