

**F-1 I-20 Application – PPREP Program**

**This form, along with the other forms and documents required  
for the I-20, should be e-mailed to:  
oiss@nvcc.edu**

Please complete both pages of the form.

Name: \_\_\_\_\_  
*Family Name*
*First Name*
*Middle Name*

Date of Birth: \_\_\_\_\_ SIS/EMPLID #: \_\_\_\_\_  
*Month / Day / Year*

Gender (male/female): \_\_\_\_\_ City and Country of Birth: \_\_\_\_\_

Are you currently in the United States?: Yes  No  Country of Citizenship: \_\_\_\_\_

If yes, what is your current visa status?: \_\_\_\_\_ When does your current status expire?: \_\_\_\_\_

In which semester do you want to begin your studies at NOVA? Spring (January)      Fall (August)

The PPREP program is offered on the campuses indicated below:

Annandale                  Alexandria                  Loudoun                  Manassas                  Woodbridge

Please check how you intend to pay the International Student Application fee:

Money Order:      Wire Transfer:

Student application information:

Section A.

My goal is to:

Study for an Associate degree at NOVA after completing the PPREP program. Interested Major: \_\_\_\_\_

Study only English at NOVA. \_\_\_\_\_

Section B.

Please indicate the English test you have taken and the score. All new students to NOVA will be placed in PPREP level based on their initial English scores. An additional English placement test will be given upon arrival to NOVA to verify the correct level.

Any current NOVA student applying for a *Change of Level* will be placed in a PPREP level based on their ESL Placement Recommendation.

**I am a new student to NOVA** and have taken one of the following tests within the past five years: Please add subsection scores.

TOEFL	Score:	R	W	L	S
IELTS	Score:	R	W	L	S
ESL Placement Recommendation	Score:	Level:			

**I am a current student at NOVA** who is applying for **Change of Level** (provide score on blue sheet).

ESL Recommended Placement: \_\_\_\_\_ Level: \_\_\_\_\_

Student's email address: \_\_\_\_\_  
Communication will be by email. Please check your account regularly. Note: We have experienced difficulty sending attachments to hotmail.com or live.com. Please provide another account if you have one.

Permanent Address Outside U.S. (This information is required for I-20):

Street Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
City: \_\_\_\_\_ Country: \_\_\_\_\_  
Province: \_\_\_\_\_  
U.S. Address (if known):  
Street Address: \_\_\_\_\_ State: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Information about Dependents:

I plan to come alone.

I will be accompanied by the following dependents. Please make sure that the names are written very clearly.  
(Dependents can only include spouse and/or children):

Name: _____	Relationship: Spouse _____ Child _____
Date of Birth: ____/____/____ <i>Month/Day/Year</i>	Gender: Female _____ Male _____
Country of Birth: _____	Country of Citizenship: _____

Name: _____	Relationship: Spouse _____ Child _____
Date of Birth: ____/____/____ <i>Month/Day/Year</i>	Gender: Female _____ Male _____
Country of Birth: _____	Country of Citizenship: _____

Name: _____	Relationship: Spouse _____ Child _____
Date of Birth: ____/____/____ <i>Month/Day/Year</i>	Gender: Female _____ Male _____
Country of Birth: _____	Country of Citizenship: _____

(Please make additional copies if you have more dependents)

Name of person completing this form: \_\_\_\_\_

Email address: \_\_\_\_\_ Telephone number: \_\_\_\_\_

I promise that the information which I have written on this form is correct and that I was authorized by the student to prepare this form.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please check below the manner in which you want OISS to send the I-20 to the student:

Please mail the I-20 to the U.S. address on my application.

Please mail the I-20 to an address outside the U.S. Add Telephone number of this address for express mail purposes.

Please call: \_\_\_\_\_ for I-20 pick up. Telephone number for pick up:  
Name