



OTHER VISA APPLICATION

This application is for individuals who hold a valid non-immigrant visa that allows you to engage in part-time or full-time study. **(B1/B2 visa holders are not permitted to enroll in academic classes).**

1. Complete attached Other Visa Application

- **Mail complete packet to:**
San Antonio College
International Student Services-Box 709
1819 N. Main
San Antonio, Texas 78212-3941 **OR**
- Send Electronically to: sac-iso@alamo.edu

2. Immigration Documents

If you hold a valid visa that allows you to study while in the U.S., the primary visa holder and/or the dependent, must submit copies of the following:

- ***Applicant visa**
- **Primary's visa** (if applicant is the dependent)
- **Applicant passport**
- **Primary's passport**
- **Applicant I-20 or DS 2019** (if applicable)
- **Primary's I-20 or DS 2019** (if applicable)
- **Form I-94:** www.cbp.gov/i94
- **Employment letter for primary visa holder**

* Current visa must be valid for duration of enrollment.

3. Official Academic Record

- Submit official transcript from previous U.S. high school or college/university.
- All foreign documents must be translated and evaluated by a member of the **National Associate of Credential Evaluation Services (NACES) organization**. Only evaluations from NACES members will be accepted.
- The evaluation must be submitted in the sealed envelope from the evaluation company or sent electronically from the NACES member.
We will not accept evaluations or U.S. transcripts that have been opened or sent electronically by the applicant.
- For a current list of NACES members, go to: www.naces.org.

4. Photo

Attach a photograph to the application

5. \$100 application fee (non-refundable)

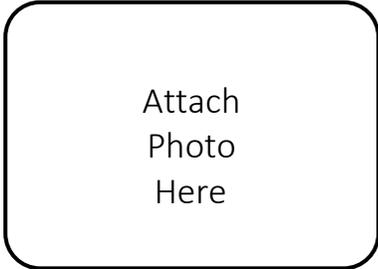
To pay fee online, go to: [Application Fee](#)

Select: Alamo Colleges District International Services

Select: International Application Fee

Select: Add to Cart and follow instructions

Submit receipt with application



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Student Information

(PRINT INFORMATION AS LISTED ON PASSPORT)

Last Name: _____ First Name: _____ Middle Name: _____

Date of birth: ___/___/___ Male ___ Female ___ Other ___ Visa Type ___ Visa Expiration Date: ___/___/___
MM DD YY MM DD YY

Passport Number: _____ Passport Expiration Date ___/___/___
MM DD YY

Country of birth _____ Country of citizenship: _____

Email: _____ Telephone: _____

Address in United States:

Street Address: _____

City: _____ State: _____ Postal Code: _____
Apt. number

ADMISSION INFORMATION

Semester/Term applying for:

Fall (August) _____ Spring (January) _____ Summer (June/July) _____
Year Year Year

Are you currently attending a U.S. college/university? Yes No

Name of U.S. college/university _____

Program of study/major at SAC: _____

I CERTIFY THE INFORMATION ON THIS APPLICATION IS CORRECT

Student Signature

Date

ISS OFFICE USE ONLY

Banner ID _____ Visa Type _____ Exp. Date _____

P/DSO _____ Date _____