



**Atlantic Technical College
& Technical High School**
4700 Coconut Creek Parkway
Coconut Creek, FL 33063
754.321.5100

**Atlantic Technical College
Arthur Ashe, Jr. Campus**
1701 NW 23rd Avenue
Fort Lauderdale, FL 33311
754.322.2800

**Atlantic Technical College
Coconut Creek High School
Campus**
1400 NW 44th Avenue
Coconut Creek, FL 33066
754.321.5350



**McFatter Technical College
& Technical High School**
6500 Nava Drive
Davie, FL 33317
754.321.5700

**McFatter Technical College
Broward Fire Academy Campus**
2600 SW 71st Terrace
Davie, FL 33314
754.321.1300
browad.k12.fl.us/bfa



**Sheridan Technical College
& Technical High School**
5400 Sheridan Street
Hollywood, FL 33021
754.321.5400

**Sheridan Technical College
West Campus**
20251 Stirling Road
Pembroke Pines, FL 33332
754.322.3900

Sheridan Technical High School
3775 SW 16th Street
Fort Lauderdale, FL 33312
754.321.7450

INTERNATIONAL STUDENT APPLICATION

Please, type or print in ink. Complete all sections of this application.

Current Visa Status

F-1 _____ F-2 _____ B-1 _____ B-2 _____ Other _____

I-94 expiration Date _____

(mm/dd/yyyy)

Do you have any Dependents? Yes No (If yes, attach dependents' Passport)

Will you be applying for the Student Visa in your Country? Yes No

Will you be applying to change your Visa status in the U.S.? Yes No

Do you have a current I-20? Yes No

Name of School Attended _____

Dates Attended _____ Currently Enrolled? Yes No

Do you have Dependents currently on an I-20? Yes No

PERSONAL INFORMATION Male Female

Student full legal name: (exactly as printed on your passport)

Last Name (Surname) _____ First (Given) Name _____ Middle or Maiden Name _____

PHYSICAL ADDRESS INSIDE THE UNITED STATES:

Number and Street _____ Apt. Number _____

City or Town _____ State _____ Zip Code _____

United States Telephone Number (area code/telephone number) _____ Email address _____

PERMANENT ADDRESS OUTSIDE THE UNITED STATES: (MANDATORY)

Number and Street _____ Apt. Number _____

City or Town _____ State/Province/Territory _____ Postal Code _____

Country _____ Phone (in home country) _____

Please check where you wish admission correspondence to be mailed? US Foreign

Native Language _____ Date of Birth: _____ City of Birth: _____
(mm/dd/yyyy)

Country of Birth _____ Country of Citizenship _____



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REGISTRATION: (please indicate year on line)

Fall Semester _____ Winter Semester _____ Summer Semester _____
Year Year Year

Program _____

I Will Attend: (Please Check One)

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754.321.5100 · AtlanticTechnicalCollege.edu
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754.322.2800
- McFatter Technical College**, 6500 Nova Drive · Davie, FL 33317
754.321.6500 · McFatterTechnicalCollege.edu
- Sheridan Technical College**, 5400 Sheridan Street · Hollywood, FL 33021
754.321.5400 · SheridanTechnicalCollegee.edu
- Sheridan Technical College West Campus**, 250251 Stirling Road · Pembroke Pines, FL 33332
754.322.3900

PROVIDE PREVIOUS EDUCATION HISTORY BEGINNING WITH HIGH SCHOOL:

Dates Attended	Type of School (High School, College, University)	Full Name of School	Certificate
From _____ To _____			
From _____ To _____			
From _____ To _____			
From _____ To _____			
From _____ To _____			
From _____ To _____			
From _____ To _____			
From _____ To _____			

THE FOLLOWING DOCUMENTS ARE REQUIRED FOR ADMISSION INTO ANY OF THE THREE (3) TECHNICAL COLLEGES:

High School or High School Equivalency Diploma - educational records must be certified as being the equivalent to a secondary and or postsecondary education in the United States (refer to the school website to see the List of agencies that evaluate Foreign transcripts), if applicable.

Evidence of English proficiency (TOEFL) - minimum score of 68 on the Internet-based test or a minimum score of 520 on the paper-based test, if applicable.

Evidence of Financial Support - confidential financial statement must be completed and sign by financial sponsor. Financial evidence should include copies of the three most recent bank statements showing that there are sufficient funds to cover the total cost of education (tuition, fees, books, supplies, living expenses (\$5,000.00 if you live with a relative, \$10,000.00 if you live alone. *Please note that the living expenses figure does not have to be paid. You only must show that you have that amount to support yourself and as a commitment that you will not be a public charge.*), transportation, and incidental expenses); the bank statements must be dated within 30 days of the date you filed; each dependent will require additional funds in the amount of \$2,500.00.

Copy of your Current Passport Biographical Page - also, copies of current I-20, Visa, and Dependent's Passport, if applicable.