



101 College Heights
Cisco, Texas 76437

STATEMENT OF UNDERSTANDING

CONTACT: International Admissions
PHONE:(254) 442-5132 **FAX:** (254) 442-1449
EMAIL: international.admissions@cisco.edu

Please read these statements carefully. You must agree to each statement before you will be considered for admissions.

I _____ understand and agree that:

Printed Name of Applicant

1. I must make my own arrangements for housing.
2. I must maintain insurance coverage while enrolled at Cisco College.
3. I have read and understood all admissions procedures. I understand that all documents and materials relating to my admission should be forwarded to the Office of Admissions-International Student Liaison. I also understand that my file will not be reviewed for admissions until all documents are received.
4. My original application and materials are valid for only one year.
5. I accept immigration restrictions, which prohibit all off-campus employment and require completion of a full course of study (12 semester credit hours).
6. I must be in Cisco or Abilene (whichever campus the I-20 states) on or before the date specified on the I-20, but no earlier than 30 days. If I cannot arrive on time, I must request that my application be considered for a subsequent semester.

Signature of Applicant

Date