



# Washtenaw Community College

## Office of Admissions

### **F-1 STUDENT SIGNATURE FORM**

I certify that the information I submitted on my application is correct and complete to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Name (Please Print Clearly)

WCC Student ID Number (if known): \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_

#### **Permanent Street Address in Home Country:**

Street Address: \_\_\_\_\_  
(P.O. Box not acceptable)

City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

**PLEASE MAIL THIS COMPLETED FORM TO:**  
Washtenaw Community College Attn: Office of Admissions/International  
4800 East Huron River Drive, Ann Arbor, Michigan 48105-4800  
t. 734.973.3542 [www.wccnet.edu](http://www.wccnet.edu)