



## Emergency Contact Information

Emergency Contact: \_\_\_\_\_

First name

Middle name

Last Name

Relationship to Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street Address Line 1: \_\_\_\_\_ City: \_\_\_\_\_

Street Address Line 2: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

## Financial Support

Are you planning to come with dependents? \_\_\_\_\_ (A dependent is someone who would be traveling here and living with you and that you would be financially responsible for, such as a spouse or child) If so, you will need to upload each dependent's passport.

Dependent 1: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First Name Middle Name Last Name

City of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent 2: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First Name Middle Name Last Name

City of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent 3: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First Name Middle Name Last Name

City of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

Dependent 4: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
First Name Middle Name Last Name

City of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Financial Support Continued**

Are you a financial self-sponsor? \_\_\_\_\_

If not, list your financial sponsor and relationship below:

Financial Sponsor: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Autobiographical Essay**

*Instructions: all applicants must complete this section.*

*Please write a short paragraph outlining your academic goals at Erie Community College. Please include the name of the major that you wish to enroll. Also, please state whether you plan to transfer to another 4-year university in the U.S. or plan to return home.*