



University of St. Martin

GED Application Package

Please be sure to return the completed application package with supporting documents to USM Student Service Center no later than the respective deadline.



Non-Degree Application Fee Slip

Submit the slip with your Application fee of \$25.00 (late fee \$40.00) to the Business Office and return stamped slip to the Office of Admissions along with the completed application form by/before the relevant deadline.

First Name _____ Last Name _____

Enrolling: Fall Spring Year _____

COURSES:	NON-DEGREE APPLICATION DEADLINES:	
	SPRING SEMESTER	FALL SEMESTER
GED	2 nd Friday in December	Last Friday in July
Pre-USM	x	Last Friday in June
CEP	2 nd Friday in December	Last Friday in July
ESL	2 nd Friday in December	Last Friday in July

CHOOSE COURSE OF CHOICE	
Continuing Education Certificate Program	<input type="checkbox"/>
Pre – USM	<input type="checkbox"/>
GED	<input type="checkbox"/>
English as a Second Language	<input type="checkbox"/>
Other _____	<input type="checkbox"/>

For office use only:

Student ID#:

Business office approved:

Payment received:



Student ID number: _____

GED Application Form

Anyone who is 16* years or older and who does not have a high school diploma or has a vocational training diploma can register.

Application deadlines: Spring – December 15 / Fall – Last Friday of July

PERSONAL INFORMATION			
First Name:	Middle Name:	Last Name:	
Date of Birth: (dd/mm/yy)		Place of Birth:	
Native Language:		<input type="checkbox"/> Female	<input type="checkbox"/> Male
Citizenship:	<input type="checkbox"/> Dutch (proof required)	<input type="checkbox"/> French (proof required)	<input type="checkbox"/> Other (specify):
Residency:	<input type="checkbox"/> Permanent	<input type="checkbox"/> Temporary	Exp date: _____ / _____ / _____
Permanent ID #		Temporary ID#	
Address:			
E-mail:			
Contact number:			
In case of emergency, please notify:			
Telephone:			
ACADEMIC /WORK INFORMATION			
Last high school attended and year:			
Did you graduate:	<input type="checkbox"/> Yes _____ (indicate year)	<input type="checkbox"/> No	
If employed, name of company:		Telephone:	
Position:			
PROGRAM INFORMATION			
Semester:	<input type="checkbox"/> Spring (Jan) <input type="checkbox"/> Fall (Aug)	Year _____	<input type="checkbox"/> Morning <input type="checkbox"/> Evening
Method of learning:	<input type="checkbox"/> Online	<input type="checkbox"/> Face to face	<input type="checkbox"/> Blended
GED Class/ Subjects:			
How did you hear about USM GED:	Newspaper _____	References _____	Other _____



Candidates *under-18 are required to have their parent/guardian sign the “GED Test Candidate Rules Agreement and Parental Consent” form in their GED online account before scheduling their exam. Complete this application and submit all supporting before the application deadline.

PAYMENT INFORMATION			
Method of Payment:	Bank transfer _____	Cash _____	Check _____

*Minimum requirements for the Blended or Online-only program: These programs cannot be done using a cellphone. A Laptop, or PC with a fast processor, monitor, speakers, microphone, webcam are required to participate.

Internet Connection should be fast enough to keep up with classes. USM will not be held liable for students in these two programs who are unable to attend online classes due to internet or hardware issues.

Conditions of enrollment:

All payments in full or payment plan arrangements are to be made two weeks prior to the first day of classes. The University of St. Martin reserves the right to modify its curriculum, tuition, rates, program, rules and regulations. The University of St. Martin reserves the right to cancel any course announced in the event of insufficient student enrollment. By signing this document, you agree to have read and accept the information indicated and as stated on the “GED TUTORIAL & EXAM INFORMATION” sheet, with emphasis to the withdrawal, refund and payment plan requirements and deadlines. The undersigned declares to have read and agrees to this. -----

I certify that the statements made on this application are correct and complete.

Student Name:

Date:

Signature:

Signature:

Parent name:



Affidavit of Financial Support

With this form please attach documentation of Source of Funds.

Student Name: _____
Last name First name Middle initial(s)

Home Address: _____

Telephone number: _____

Name of Sponsor: _____ Company Name: _____

Telephone number: _____

SOURCE OF FUNDS

FINANCIAL SUPPORT FOR A SEMESTER (6 MONTHS)

Personal/Family Savings: \$ _____

Job letter from current employer **or** Bank verification in the form of a **bank letter** of current or savings account documenting available amount in liquid assets. (Salary statements, accountant summaries and property **cannot** be used).

Scholarship: \$ _____

Official scholarship award letter from the institution or government awarding the scholarship. The award letter must contain the name of the applicant, the amount of money available for each year of study, the duration of the award (number of years), the degree and major field of study for which the award is tenable.

Government or Employer Grants: \$ _____

Official letter indicating amount of support and containing the same information as for "Scholarship" described above.

Loans: \$ _____

Official letter from credit institution indicating approval of the loan and the amount approved. Bank statements carry no liability on the part of the bank, thus is not usable.

MINIMUM ESTIMATED TOTAL \$ _____

Each of these totals should equal the institution's estimated expenses for the GED program. I will be using the USM Monthly Payment Plan Option (Attach Business Office Agreement)



DECLARATION OF SPONSOR

I certify that all information provided on this affidavit, and on the attached document(s) proving availability of funds is true and valid. I do intend to make the monetary contributions as stated in the total column during the applicants stay at the University of St.Martin. I accept this Affidavit as a binding document.

Signature of Student _____ Signature of Sponsor _____

Date signed _____

INTRUCTIONS FOR COMPLETING THE AFFIDATVIT OF FINANCIAL SUPPORT

1. The affidavit must be fully and properly completed. Please type or clearly print in black or blue ink.
2. The “Declaration of Sponsor” section must be signed by the sponsor; no one else may sign this section.

Supporting evidence of financial resources must be attached to the affidavit. An original letter on official stationery is required from a bank or other financial institution. The letter must show the sponsor`s savings deposit, certificates of deposit , or other types of accounts containing readily available funds. Information provided by the bank should state (1) date account(s) opened, and (2) amount of funds in the account(s). The letter from the sponsor`s employer must state (1) date and nature of employment, (2) salary paid, and (3) whether the position is permanent or temporary.

GED PROGRAM COSTS

TUTORIAL-ONLY FEES:

Persons interested in taking one or two classes will be charged the \$25 application fee and the following per course:

Reasoning Through Language Arts (English)	USD 200
Mathematical Reasoning	USD 200
Social Studies	USD 150
Science	USD 150
Cost for all four tutorial subjects	USD 725
Up-front payment discount of GED Tutorial Program	USD 690

TUTORIAL & EXAM PACKAGE:

Students that will be taking both the GED Tutorial and Exam are eligible for a package deal. A **deposit of at least 50%** is required before the start of the program. The remaining balance must be paid by the second month of classes.

PACKAGE FEES:

Total package cost:	USD 990
Up-front payment discount of package:	USD 950

***The student expenses above are estimated expenses and are subjected to change, please confirm fees with the GED Program coordinator or Business Office.**



GED Admissions Checklist

Before submitting this application form ensure that you have met and completed all of the components outlined in the list below.

DOCUMENTS TO SUBMIT	
Application form	<input type="checkbox"/>
Application fee (\$25.00) <i>(additional \$15 added after deadline)</i>	<input type="checkbox"/>
Official secondary school diploma and transcript a) St. Maarten Academy PSVE b) Milton Peters College - TKL c) Milton Peters College - PKL d) Equivalent (to be evaluated)	<input type="checkbox"/>
Copy of ID card / Passport <i>(Verified at USM)</i>	<input type="checkbox"/>
Affidavit of Financial Support	<input type="checkbox"/>
Passport picture (2)	<input type="checkbox"/>

FOR OFFICE USE ONLY

GED Selection: Package Classes
Payment Plan: Yes No, paid in full
Approved for GED: Yes No Initial Bus. Office: _____

Payment Plan Schedule*:

1st payment/Date: _____ Initial: _____

2nd payment/Date: _____ Initial: _____

3rd payment/Date: _____ Initial: _____

*If other arrangement made, please describe and explain reason:
