

JOE BLASCO MAKE-UP TRAINING CENTERS

Professional Make-up Artist Education

INFORMATION FOR FOREIGN STUDENTS

The procedure to obtain an M-1 Student Visa (M-2 for spouse and minor children) begins by the prospective student completing and submitting an application to one of the Joe Blasco Makeup Centers, USA.

When Joe Blasco Make-up Training Centers determines that a prospective student's qualification meets all standards for admissions and if we then accept the applicant for enrollment in a full course of study, we issue the student a certificate of eligibility (I-20 M-N). In order to issue I-20 Form, the student must first register at Joe Blasco Make-up Training Centers. This I-20 Form is then taken by the student to the American Consulate in the student's home country with his/her supporting financial documents for use in supporting the M-1 Visa application.

Joe Blasco Make-up Center West

1670 Hillhurst Avenue
Hollywood, CA90027
Phone: 1(323) 467-4949
Fax: 1(323) 664-1834

Joe Blasco Make-up Center

5422 Carrier Drive, Suite 304
Orlando, FL 32819
Phone: 1(407) 363-1234
Fax: 1(407) 352-5190

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INTERNATIONAL STUDENT INFORMATION

Tuition and Registration Fee Payment Options

If the student chooses to wire the deposit (\$500) and /or the tuition payment directly into the school's account, he/she may do so.

Information on Visas and studying abroad, please visit Study USA website: www.studyusa.com. For more information please review the list of websites that is included in this packet.

Procedures for Wire Transfer

If you are interested in paying via wire transfer, please call the school at 407-363-1234 or send an email to info@joeblasco.com for pertinent information.

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INTERNATIONAL STUDENT APPLICATION FOR ADMISSIONS

This form provides information required to complete the I-20 form. Please fill out the form completely, and submit it along with all supporting documentation and the \$500 non-refundable registration fee to Joe Blasco Make-up Training Centers to avoid any delay in processing.

Name:

(Family) (Given) (Middle)

Date of Birth: _____ Female Male Country of Birth:

MM / DD / YYYY

Country of Citizenship: _____ Native Language:

Permanent Mailing Address:

Telephone: _____ Email:

Please select one course name and start date from our current Course Schedule.

Course Name:

Course Start Date:

How was your registration fee paid? (select one): Enclosed Check Wire Transfer (Receipt Enclosed)

Submitted Online Other: _____

What is your present knowledge of English on a scale of 1 to 5, 5 being the highest?

Reading

Writing

Listening

Speaking

All applicants who will enter U.S. on a student visa must complete the following questions about financial support.

Source of financial support (SELECT ONE):

Self Family Member

Parent Friend

Current Account Balance:

Name and Address of Bank:

For efficient processing, bank statements should accompany this application and MUST include a current date, account balance and show funds in U.S. Dollars. If financial support is not coming from the student, the following statement must be completed by the student's financial sponsor:

I (Financial Sponsor) _____, certify that I will assume full financial responsibility (including educational expenses and living expenses) for (Student) _____ while he/she is enrolled at the Joe Blasco Makeup Training Center.

The applicant is my (state student's relationship to applicant)

Signature of sponsor _____ Date

Emergency contact person (Preferably in the US):

Name _____ Relationship

Address _____ Telephone

References:

1. _____

Name Address Phone

2.

Name Address Phone

Work History:

Current Company Name Address

Supervisor Company Telephone

How long employed? Position Held

Education:

All students enrolled at the Joe Blasco Makeup Center must be at least 18 years of age and have proof of a high school diploma or its equivalent. Proof of your diploma should accompany this application.

Did you attend high school? yes no

Name _____ Graduation Date: _____

City _____ State _____ Country _____

Did you attend a college or university? yes no

Name _____

City _____ State _____ Country _____

Major/ Field of Study: _____

Date Studies Completed: _____

Have you ever attended any of the following:

Art School yes no

Name/Location: _____

Barber School yes no

Name/Location: _____

Cosmetology School yes no

Name/Location: _____

Have you ever sold cosmetics? yes no

Name of company

Have you ever applied makeup to others? yes no

Explain:

Explain in detail any additional education you have had which may be relative to the study of makeup:

What are your career goals:

I certify that the information on this application is true and correct.

Student Signature: _____

Date _____