

## **Cayman Islands Immigration Information**

Congratulations on your acceptance to St. Matthew's University, School of Medicine!

The information below needs to be completed and signed with the original forms sent to the Florida office at the address listed below, **Please keep a copy of the immigration paperwork for your records. Faxed and emailed copies of the original documentation will not be accepted and will be returned to the sender.**

St. Matthew's University, School of Medicine  
Attention: Immigration Department  
12124 High Tech Ave.  
Ste 350  
Orlando, FL 32817  
Fax: 1.800.565.7177 or 407.488.1702

**ALL OF THIS INFORMATION IS MANDATORY FOR ENTRANCE TO GRAND CAYMAN AND IS FORWARDED TO THE GRAND CAYMAN IMMIGRATION DEPARTMENT FOR REVIEW. ONCE ALL PAPERWORK IS RECEIVED, YOUR FILE IS COMPLETED AND NO ADDITIONAL ACTION IS NECESSARY. YOU WILL RECEIVE YOUR STUDENT VISA FROM IMMIGRATION ONCE YOU ARRIVE ON GRAND CAYMAN**

**\* STUDENTS ARE REQUIRED TO HAVE A ROUND TRIP AIRLINE TICKET UPON ENTERING GRAND CAYMAN**

### **Completed immigration paperwork deadline:**

One month after acceptance. Late paperwork may result in the delay of receiving your student visa or may result in failure to start the accepted semester.

### **Paperwork needing to be completed:**

Please keep in mind that an incomplete application will not be processed and will be returned to sender. The Grand Cayman Immigration Department will not accept late applications. Please allow sufficient time for handling and processing to ensure that your applications submitted by the due date. Late charges may apply!

Please follow the guidelines below to complete the student visa application completely. **Before** filling out the paperwork, make sure you contact the Immigration Department at to go over the step by step instructions.

### **APPLICATION FOR A STUDENT VISA, PAGE 1:**

Please fill out numbers 1-12 on page 1 completely including your **passport number**.

Question 6 answer: Obtain Medical Degree

Question 7 answer: St. Matthew's University, School of Medicine

Question 8 answer: Yes

Question 9 answer: Medical Degree

Question 9 (i) answer: 2 Years

Question 9 (ii) answer: Leave blank.

Question 10 answer: 2 Years

Question 11 answer: Yes

## **APPLICATION FOR A STUDENT VISA, PAGE 2:**

Please fill out numbers 13-18 on page 2 completely including your signature and date at the bottom of the page. **If there are any missing signatures, Grand Cayman Immigration will not process the application.**

Question 13 answer: Answer accordingly. Common answers include "savings", "loans", "parents", etc.

Question 14 answer: Details needed for conviction include: official charge (misdemeanor, felony, etc.), case resolution, etc.

Question 15 answer: Details needed for disease or disability include: listing of disease/disability, medications and treatments.

Question 16 answer: Residence Hall and Residence Suites. This is if you are not already exempt from on-campus housing.

Question 17 answer: Answer accordingly. (example: \$1500 - \$2000 per month; according to your choice of room type)

### **Medical Examination Form Part 1**

Student is required to fill out completely. Please include your signature and date as well as the medical examiner's signature and date. The medical examiner must include his physician stamp.

### **Medical Examination Form Part 2**

The medical examiner will be required to fill out the information required as well as sign and date the page. The medical examiner must be a physician or physician's assistant. In addition, the medical examiner must include his physician stamp.

### **Medical Examination Form Part 3**

a) The medical examiner will have to fill out the results of the Chest X-Ray (the only x-ray needed), HIV, and VDRL tests. You will also be required to submit written reports to support the test result information on this page [radiologist report (chest x-ray), and lab reports for the HIV and VDRL tests]. In addition, the medical examiner must include his physician stamp.

b) The medical examiner will have to fill out his/her name, qualifications, medical registration number and address

c) **The medical examiner will need to sign and date the form. In addition, the medical examiner must include his physician stamp on this form. Please be sure that the physician stamp on medical parts I, II, and III are from the physician who examined you and no other physician.**

### **Passport Photos**

If you have already submitted one frontal and one side photo, please disregard this section. If you have not, you will need to submit actual 2 x 2 passport size photos (Please keep in mind that the 1 side passport photo will need to have the same white background and you in the same clothing as the 1 frontal photo)

### **Police Report**

Criminal background check on yourself from your local police department. The background check will be required to be on letterhead with an official signature, raised seal or police department stamp, and contact information. For example, if you resided in Orlando, FL, you would need to obtain a local criminal activity letter from the City of Orlando Police Department. **Please do not fax a copy. This document will need to be the original.**