



130 Woodward Avenue • Escondido • CA • 92025 • Office: 760-294-4490 • Fax: 760-294-4209 • www.balboaschool.com

APPLICATION FOR INTERNATIONAL ADMISSION

All sections must be filled out completely (write N/A if the information is not applicable).

STUDENT INFORMATION

Student's Family Name (surname): _____ First Name (given): _____

Middle Name: _____ Suffix (First, Second, Third): _____ American Name: _____

Date Of Birth (month/date/year): _____ Gender: Female / Male

Country of Birth: _____ Country of citizenship: _____ Country of permanent residence: _____

Current Grade Level: _____ Grade Level when attending Balboa: _____

How many years would you like to study at Balboa School? _____ Date you would like to begin your studies: _____

FAMILY INFORMATION

Father's Name: _____ Email address: _____

Mother's Name: _____ Email address: _____

Permanent address in home country: _____

City: _____ Province/Territory: _____ Country: _____ Zip: _____

Telephone Number: _____

Do both parents understand and speak English? Yes / No If no, which is the best way to communicate with parents? _____

Do you want your form I-20 mailed to the above address? If not, where would you like it mailed?

Telephone Number: _____

I do not want my form I-20 to be mailed. I would like it picked up by: _____

Who will be your legal guardian while studying at Balboa (name & phone number)? _____

Agency or name of person who is referring you to Balboa: _____

Telephone Number: _____ Email address: _____

SCHOOL INFORMATION

Previous School & year(s) attended:

School: _____ Grade & Year attended: _____

School: _____ Grade & Year attended: _____

If you are currently in the US now, please complete below before going on to the next section. If not, please skip to the next section.

What is your immigration status? _____

If you currently have an F-1 Visa, what is your SEVIS ID #? _____

Purpose of requesting a form I-20 from BCS is to: _____ transfer in _____ regain F-1 status

I am currently attending school in the US? _____ yes _____ no

If yes, name of school: _____

If not currently attending school, what was the last date of attendance? _____

FINANCIAL INFORMATION

Please refer to Balboa’s estimated annual cost to fill out this section.

Sponser’ #1

Name of person financially responsible: _____

Total amount this person is giving me each year for tuition: _____

Total amount this person is giving me each year for living expenses: _____

Sponser #2

Name of person financially responsible: _____

Total amount this person is giving me each year for tuition: _____

Total amount this person is giving me each year for living expenses: _____

Sponser #4 - Free Room and Board

Name of person I will be living with for free: _____

MEDICAL INFORMATION

My child is currently being treated for the following medical conditions: _____

My child has allergies? _____ Please list: _____

Please circle if your family has a history of: Diabetes High Blood Pressure Heart Attack/Heart Disease Cancer

Tuberculosis Blood Clots Stroke Epilepsy/Seizure Alzheimer’s Mental Illness Family History Unknown

Are there other major conditions in your family? _____

My child takes the following:

Medications	For what conditions?	Dosage	Frequency	Date Started

My child takes medications during the school day: _____ Please list: _____

All medications must be turned into the office along with a prescription medication form (available in the office).

In case of an emergency, I give permission for Balboa School to seek, authorize, and consent to any medical treatment or care necessary for my child. This authorization, hereby granted to Balboa School, shall continue in effect until such time as I make direct contact with the treating doctor. This authorization in no way obliges Balboa School or its authorized representatives, to pay or be liable for any costs or expenses incurred in the care of or treatment of my child; and I agree to pay all costs and expenses incurred for the treatment and case of my child.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____

PROGRAM PARTICIPATION

I understand:

Throughout the course of the year, students at Balboa School take a variety of field trips. These trips range from visiting museums to touring college campuses. We consider it an integral part of our program that students become exposed and interact within the community around them. Students will either walk, take a taxi, or ride with parent volunteers. I understand my child will go on off campus field trips with Balboa School. I understand that the staff of Balboa School will take reasonable care of my child, but I also recognize that they will be off campus and may occasionally encounter hazards beyond the staff's control. I agree to be fully responsible and hold harmless Balboa School, and any of its employees and parents, from any and all liability for any and all harm arising to my child as a result of participating. This will hold true for any and all years that my child attends Balboa School.

Balboa School maintains the right to all student-generated work produced, created, or developed at Balboa School by my child. It also maintains the right to use my child's image in stills, video tape recordings or other media, such as the internet and/or yearbook, in such a way as it deems fit for now or in the future for publicity or other purposes. My child's name may be used in conjunction with Balboa School events, publicity and other ways as it deems fit now or in the future for publicity or other purposes. Balboa School has my permission to use photos and student-generated work.

My signature below indicates that I have read and agree to the above and that all information on this application is complete and factually presented.

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____

Upon enrollment all students are assessed. For assessment purposes, please answer the following:

1. Student's Native language: _____
2. Student's Personal email address: _____
(write clearly)
3. Your English proficiency: None Little Fluent Student studied English for how many years? _____

Please answer the following questions:

For parents to answer:

What excites you the most about your child studying at Balboa School?

What is your most important goal for your child while studying at Balboa School?

What is your child's greatest strength academically?

What is his/her greatest interest outside of school?

For Student to answer:

What is your greatest strength academically?

What is your greatest interest outside of school?

What career are you interested in?

After graduation I am interested in:

4 year University Community College returning home

All information on this application is complete and factually presented.

Student Name (please print): _____

Student Signature: _____ Date: _____

Parent/Guardian Name (please print): _____

Parent/Guardian Signature: _____ Date: _____