



International Supplemental Application (Please complete Supplemental Application in English)

STUDENT INFORMATION: (Name as it appears on student's passport) (Submit a color copy of passport and a current photo)

First Name: _____ Family Name: _____ Middle Name: _____
 Nickname: _____ Gender: Male Female
 Home Address: _____ City: _____
 Province: _____ Country: _____ Postal Code: _____
 Student's Email: _____ Skype Name: _____
 Passport Number: _____ Issuing Country: _____ Issue Date: _____
Month / Date / Year Expiration Date: _____
Month / Date / Year
 Date of Birth: _____ Country of Birth: _____ Country of Citizenship: _____
Month / Date / Year
 Proposed dates of attendance from: _____ to _____ (Please refer to school calendar for holiday schedule)
 NO, I do not need a host family. I am Staying with Relatives Made own Arrangements / YES, I need a host family
 Language(s) spoken: _____ English Proficiency: Beginner Intermediate Advanced
 Proficiency English Test Score (TOEFL): _____ Have you studied English outside of school? Yes No How many years: _____
 Name of Current School: _____
 Address of School: _____ City: _____
 Province: _____ Country: _____ Postal Code: _____
 Telephone: _____ Fax: _____ Email: _____
 Name of English Teacher: _____ Email: _____
 Name of Previous School: _____
 Address of School: _____ City: _____
 Province: _____ Country: _____ Postal Code: _____
 Telephone: _____ Fax: _____ Email: _____
 Name of English Teacher: _____ Email: _____

PARENTS / GUARDIAN INFORMATION

	Parent / Guardian 1	Parent / Guardian 2
Full Name		
Relationship to Student		
Home Address		
City, Province, Country, Postal Code		
Home Phone		
Cell Phone		
Work Phone		
E-Mail		
Skype Name		
Language(s) Spoken		
Occupation		
Employer		
Student lives with: <input type="checkbox"/> Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other, please specify:		