

Student Application Form

(Include requested documents)

PICTURE

School year requested _____ Application Date: ____ / ____ / ____

Grade: PK3 PK4 Kinder 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th

STUDENT INFORMATION

Last name:		First Name:			
Age:	Date of Birth (dd/mm/yy):	Cedula or Passport No.:	Nationality:	Address:	

PARENT/GUARDIAN INFORMATION

Father's Full Name		Nationality:	Place of work:	Position held:
Home Phone Number	Work Phone Number:	Cell Phone:	email:	
Mother's Full Name		Nationality:	Place of work:	Position held:
Home Phone Number	Work Phone Number:	Cell Phone:	email:	

EMERGENCY CONTACT INFORMATION

Emergency contact other than parent/guardian:

Full Name	Relationship	Telephone
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Please indicate who the student will be living with:

Both parents
 father
 mother
 Other

FAMILY INFORMATION

Number of siblings: _____ What languages are spoken at home? _____, _____

1.	Full Name	Age	Grade	School
2.	Full Name	Age	Grade	School
3.	Full Name	Age	Grade	School

List previous schools attended by your child

1. School's name: _____	Grade: _____	Country: _____
2. School's name: _____	Grade: _____	Country: _____

Why would you like your child to attend this school? What are your expectations about your child's education?

❖ I certify that the information provided is correct.

SPONSOR'S SIGNATURE

DATE: ____ / ____ / ____

How did you/your family hear about Boston School International?

- Employer
 Friends
 Relatives
 Advertising
 Website
 Current School
 Relocation Service
 BSI Staff Member

Referral verification. Please indicate name and phone number of BSI referring family or staff member (ONLY if applies)