

Parent Affidavit of Support and Proof of Financial Capability

Applicants for F-1 visas (non-immigrant education visas) must provide credible documentary evidence of enough readily available funds to meet all expenses for the first year of study. In addition, satisfactory evidence must be provided that ensures, barring unforeseen circumstances, adequate funds from the same source or from one or more specifically identified and reliable financial sources will be available for each subsequent year of study.

In addition to providing the information requested on this form, please submit one of the documents listed below. Documents must be photocopies or faxes, current (less than three months old). Completion of this form means you are swearing to the United States government that you will provide a specific amount of money from your own financial resources for every year your child will study and live in the US.

- Proof of income (any one of the following)
 - Pay stubs for the last six months
 - Bank statement in supporter’s name only. *This statement must include monthly statement of balances and deposits for the last six months.*

PLEASE COMPLETE

Student’s full legal name _____

Minimum annual expenses _____ Number of anticipated years of study _____

Parent/Guardian name _____

Street address _____ City _____

State or province _____ Country _____ Postal code _____

Names and ages of dependents _____

Name of employer _____

Annual salary _____ Other sources of support _____

I agree to provide no less than \$ _____
for every year of the above-named student’s program of study at John Bapst.

The information I have provided on this affidavit is true and correct.

Parent/Guardian name _____

Signature _____ Date _____

Application Fee and Tuition Deposit Credit Card Authorization Form

Student's full legal name _____
first name family name

Parent/Guardian name _____
mother's first name family name

Parent/Guardian name _____
father's first name family name

Name on card _____
first name family name

Type of card VISA MasterCard American Express

Card number _____

Expiration date _____ Security code _____

In payment for application fee (\$100) tuition deposit (\$3,500)

I authorize John Bapst School to charge my credit card the following amount: \$ _____ U.S. dollars.

Card holder's signature _____ Date _____

Cardholder's billing address _____

City _____ State or province _____

Country _____ Zip code _____

Application for Admission – Teacher Recommendation

Please provide a copy of this form to your current teachers and have them email to admission@johnbapst.org.

Dear Educator:

The student named below is a candidate for admission to John Bapst, a rigorous college preparatory high school. Your input is invaluable to us in our evaluation. Please take a few moments to answer the following questions. If you prefer to enclose a letter in your own format, please feel free to do so. We welcome any additional remarks you may wish to make. Thank you.

Name of applicant _____

Current school _____ Current grade level _____

How long have you known the applicant and in what capacity?

Describe the student’s strengths and challenges in reading, writing, and speaking.

How has the student performed in relation to his or her potential?

Describe the student’s personal qualities that make him or her a positive candidate for a challenging academic program.

Please rate the student in the following categories:

	Exceptional	Above Average	Average	Below Average
Written Expression				
Oral Expression				
Academic Initiative				
Integrity				
Leadership				
Concern for Others				

Signature _____ Date _____

Printed Name _____ School phone _____



John Bapst Office of Admission
100 Broadway
Bangor, Maine 04401

Authorization of Release of Educational Record

Applicants and Parents/Guardians: Please fill in the information below and return this page to John Bapst by uploading to your online application or by mail.

International Applicants: Please fill in the information below if you are currently a student in an American school.

In accordance with the Family Educational Rights and Privacy Act, the undersigned consents to the release of all educational records of the applicant listed below to John Bapst.

Name of applicant _____ Date of birth _____
Parent signature _____ Date of consent _____
Name of present school _____ Present grade _____
School address _____ School phone _____
Name of school contact person providing information _____

John Bapst does not discriminate on the basis of gender, race, color, religion, sexual orientation, national or ethnic origin, or disability in the administration of its education policies, admission practices, scholarship programs, or any school administered activities.