

Crawford Public Schools
APPLICATION FOR FOREIGN EXCHANGE STUDENT

PART 1—Student Information

Student's Name: _____	DOB: _____	<i>Note:</i> Student must be at least 16 and not older than 19 as of September 1st of the school year of enrollment.
Country of Citizenship: _____		
Parent's Names: _____ (Father) (Mother)	Address: _____ _____ _____	Telephone (s): _____ _____ E-mail: _____
School year the student intends to attend: _____ School the student expects to attend: _____ Grade level the student expects to be placed: _____ (<i>Note:</i> Student must not have graduated from high school or an equivalent educational institution prior to enrollment)		
The student is or will be entering the United States on an F-1 visa: ____ Yes ____ No		
Special Needs/Concerns: _____ _____		

PART 2—Foreign Exchange Program Information

Name of Organization: _____	Name of Local Representative: _____ _____
Address: _____ _____ _____	Telephone (s): _____ _____ E-mail: _____
The foreign exchange program is on the current Advisory List of International Educational Travel and Exchange Programs that is maintained by The Council on Standards for International Educational Travel: ____ Yes ____ No	
We agree that the local representative of the foreign exchange program will confer with the High School Principal or designee throughout the Student's attendance in the District on a schedule to be determined by the Principal: ____ Yes ____ No	

PART 3—Host Family Information

Name of Host Family: _____ (Father) (Mother)	<i>Note:</i> The host family must be residents of the District and the Student must reside in the District during the period of time the Student is enrolled in the District.
Address: _____ _____ _____	Telephone (s): _____ _____ E-mail: _____

PART 4—Application Requirements

1. Attached to this application is the following documentation to establish that the student has adequate financial support: _____

2. Attached to this application is the following documentation to establish that the student is or will be covered by health insurance: _____

3. Attached to this application is the student's complete transcript.
 We provide the following brief explanation of the transcript: _____

4. Attached to this application is the following documentation to establish that the student has adequate proficiency in the English language to function in a regular classroom and not require English-as-a-second-language instruction:

5. Student wishes to receive a high school diploma from Crawford Public Schools: ___Yes___No.
If "Yes" the student must make application to the Principal prior to the beginning of the school year and must fulfill all of the District's regular high school graduation requirements. Otherwise, a foreign exchange student completing the twelfth grade in the District will be recognized with a school certificate for satisfactory attendance and participation.

Date **Applicant(s)**

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(FOR SCHOOL'S USE)

Decision on Application

Decision: _____ Accepted
 _____ Not Accepted

Notes:

Date **Superintendent or High School Principal**

Note: If accepted, admission is subject to receipt of documentation to meet requirements related to immunization, physical examination and visual evaluation. A certified copy of birth certificate or acceptable substitute (other reliable proof of child's identity and age with an affidavit explaining the inability to produce a birth certificate) must be submitted within 30 days of enrollment.