

ADMISSIONS APPLICATION

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Evergreen Academy will maintain an "Open Admissions" policy, admitting all applicants who complete the admissions process and are beyond the age of 16. Evergreen Academy is committed to the concept of equal opportunity without regard to race, color, religion, age, gender, national origin, or other legally impermissible factors.

| PERSONAL INFORMATION: | Male | Female | Single | Married |
|--|--|---------------------------------------|-------------------------|----------------------|
| Last (Faililly) | | First Country | Middle Citizenship: | Country |
| Address in Home Country:Hou | | Street y/Province | Apt. | Country |
| City | Territor | y/Province | Zip | Country |
| U.S. Address: House Number | use Number Street | | Apt. | |
| City | | State | | Zip |
| Cell Number: | | | | |
| Email Address: | Alterna | te Email Address: | | |
| □ US Permanent □ Change of Status (COS) request □ I currently have an I-20 Form from a | Current Visa Type: | | Current Visa Expiratio | |
| What time would you like to study? | Morning | Afternoon | Evening | |
| I would like to start classes by:How did you hear about Evergreen Academy? Educational Information | MM/DD/YY | | | |
| How long do you plan to study at Evergreen A | • | | | |
| What was your occupation in your home cour Educational Background: Middle School Have you taken the Official TOEFL before? | High School C Yes No | ollege/University If Yes, what year? | Graduated Score: | |
| | or personal gain o further my studies ba | ack in my country | ☐ To study at a U.S. Co | ollege or University |

| Emergency Contact/Legal Guardian Information Contact Person in U.S. | |
|---|---|
| Name: | Relationship: |
| | Email: |
| Signature of Legal Guardian: | |
| Sharing Information | |
| | listed above in an emergency. (Please note: For your protection, personal |
| information about you or your application status CANNOT (and w | vill not) be shared with anyone without your approval. If you want your emergency |
| contact(s) to receive this information, please signhere. | |
| Printed Name of Student Additional Notes: | Signature of Student |
| Health Insurance | |
| | nts and it is the sole responsibility of the student to obtain his/her own Health Care |
| Insurance. If you do not have Health Care Insurance and would lik | ke to purchase insurance, Evergreen Academy can and will assist you to obtain it, |
| using their contacts with International Student Health Insurance pr | roviders. |
| Evergreen Academy will not be held liable for any illness(es), accide | ents or injuries while studying at Evergreen Academy. |
| ☐ I am interested in Health Care Insurance | \square I am not interested in Health Care Insurance |
| Printed Name of Student | Signature of Student |
| Declaration of Finance Government Regulation requires Evergreen Academy to verify the f | financial resources of each international applicant of issuance of Form I-20. |
| | \$17,000.00 to meet expenses for each calendar year. (Add \$5,000.00 for each |
| dependent you have.) | , , , , , , , , , , , , , , , , |
| □ (Yes) I do meet the financial requirement(s) | (No) I do not meet the financial requirement(s) |
| | is outside the US, it must be signed by a bank official and converted into US cial requirements and must be no more than three months old. Id need a sponsor, please fill out an I-134 |
| Employment of F-1 Students in the United States | |
| I understand that F-1 students are required to have approval from U | USCIS to be able to work while in F-1 status. |
| Printed Name of Student | Signature of Student |
| Student's Agreement | |
| ~ | tements contained in this form, and that the information that I have provided is |
| rue and accurate to the best of my knowledge. I understand that m | y admission to the ESL program at Evergreen Academy is contingent upon my |
| | nderstand that if I cannot meet my financial obligations or if I have given |
| | t may result in the termination of my application and my withdrawal from the ESL |
| program. | |
| | |
| Printed Name of Student | Signature of Student |