



BEAUTY SCHOOLS
of America[®]



APPLICANT INFORMATION FOR INTERNATIONAL ADMISSIONS

Dear International Applicant:

Thank you for your interest in attending Beauty Schools of America[®]. In the *Applicant Information for International Admissions* you will find very important information regarding your admission to our institution as an international student. Please **assure that you read** all the information carefully and thoroughly. If you have any questions do not hesitate to contact the International department at our Miami campus at 305.824.2424 and we will be happy to assist you. The checklist below reviews all the necessary paperwork that must be submitted prior to the issuance of the I-20 form. Once all the required documents have been received, the I-20 will be submitted within two weeks.

1. CHECK LIST FOR I-20 ISSUANCE

A. Have completed the following forms and letters:

- International Student Application (Form IN-100)
 1. Medical Release (Form AD-101) – *if applicable*
- Applicant Declaration (Form IN-101)
- Application Fee (non-refundable) of USD\$100.00
- I-20 Packet Application:
 1. BSA I-20 Application (Form IN-500)
 2. Dependent Supplemental (Form IN-500A) – *if applicable*
 3. Acknowledgement of Responsibilities and Liability Notice (Form IN-500B)
 4. Student's Role and Responsibilities for Compliance with M-1 Laws and Regulations (Form IN-500C)
- Enrollment Agreement Contract
- Down payment for program chosen (refer to the Tuition and Fees for International Students)
- Previous Educational History:
 1. International Student Educational History (Form IN-501)
 - a. High school diploma, or official transcript from your high school, or college/university (all must be translate by a certified English translator)
 2. International Student Previous Education/Training History (Form IN-501A) – *if applicable*
 - a. Vocational studies ONLY if related to the cosmetology, barber, or spa industry official transcripts (all must be translate by a certified English translator)
- Official Bank Letter of Financial Resources from Applicant (see Official Bank Letter Sample)
- Living Expense Letter (Form IN-502) from Applicant (see Estimated Costs of Living Expense (Sample) Information Sheet for breakdown of amounts)
- Sponsor Documentations - *if applicable*:
 1. Sponsor's Statement (Form IN-503) (refer to the Sponsor Checklist for further assistance)
 2. Letter from Sponsor (see Official Sponsor Letter Sample)
 3. Official Bank Letter of Financial Resources from Sponsor (see Official Bank Letter Sample)
- U.S.A. Department of Homeland Security (DHS) Regulations BSA (Form IN-504)
- Statement Regarding Non-Social Security Number (Form IN-505)

B. Copies of the following:

- Valid Passport

C. Additional Suggested Documentation form to build your case:

- Your ties in your country or outside the U.S.A.
- Your families ties in your country or outside the U.S.A.
- Your sponsors ties in your country or outside the U.S.A.
- A letter that shows the value of the program of study at BSA.
- A letter indicating no legal issues pending.

NOTE: All items in Section A & C must be original (no copies will be accepted). All paperwork must be typed; no handwritten forms will be accepted.

Thank you for your interest in attending Beauty Schools of America®. This section contains important information regarding admission to the school as an M-1 student. Please read all the information carefully. If you have any questions call your International Admissions Representative; they will be happy to assist you.

GENERAL ADMISSION REQUIREMENTS

The International applicant who wishes to study at Beauty Schools of America® (BSA) must:

- ♦ Possess the equivalent of a U.S.A. high school diploma AND,
- ♦ Provide an official evaluation of the high school diploma; this evaluation must be prepared by a credential evaluation company.
- ♦ Be at least 16 years of age.
- ♦ Have all documents translated into English by a professional certified translator.
- ♦ Submit original documents, which will be returned to the applicant upon review by the International department.
- ♦ Complete all forms in their entirety. I-20 will be issued
- ♦ Have all forms typed - Handwritten forms will not be accepted.
- ♦ Have a valid passport. Passport must be valid for at least six months beyond the applicant's intended period of stay in the United States.
- ♦ Pay the International Application Non-refundable fee.

REQUIREMENTS FOR APPLYING TO BSA

1. International prospects must speak to an International Admission Representative regarding the programs offered at the school and the various locations that are available. Once all the questions have been answered, the next step is to choose the program that he/she will study and the school location.
2. Complete the International Student Application Form (IN-100) and submit it via e-mail to your International Admission Representative.
3. Pay a one-time non-refundable \$100.00 USD application fee. This fee should be paid via wire transfer to the school's account at the same time you submit Form IN-100.
4. Complete and submit the Applicant Declaration Form (IN-101) via e-mail to your International Admission Representative with Form IN-100.

REQUIREMENTS TO APPLY FOR YOUR CERTIFICATE OF ELIGIBILITY (FORM I-20)

Once you have submitted items 1 through 4 above, the next step is to carefully read and comply with ALL the requirements listed in the International Package (I-20 package). All forms must be typed and mailed to your International Admission Representative and your down payment must be made via wire transfer.

1. **BSA I-20 Application Form (IN-500)** - The accuracy of this form is extremely important as all the information will be used to produce your *Certificate of Eligibility (I-20)*.
2. **School Enrollment Agreement** - International applicants are required to read and sign the BSA Enrollment Agreement, which must be sent to the Primary Designated School Official (PDSO) at m1visa@bsa.edu along with a copy of the M-1 Visa issued by the Embassy/Consulate.
3. **Supplemental Dependent Form (IN-500A)** - Submit this form only if you are adding your dependent spouse and/or child in the *Certificate of Eligibility (I-20)*.
4. **Acknowledgment of Responsibilities Notice (IN-500B)**
5. **Student's Role and Responsibilities and Compliance with M-1 Laws and Regulations (IN-500C).**
6. **Make Down Payment for Program Chosen** - To find the required down payment fee refer to the *Tuition and Fees for International Students*, which is located in the International Package. Payment should be made via wire transfer to the international school account (below) or in person at the school, if in the U.S.A.

Bank Name: **Legacy Bank of Florida**

Account Name: BSA International
Account Number: 20005922
Routing Number: 067015999

7. **Official High School or College Diploma Form (IN-501)** - Students must provide an original High School or College Diploma.
8. **Evaluation of High School or College Diploma** - Any applicant who obtained their High School or College Diploma outside the U.S.A. must request an evaluation from an evaluation credential company who is a member of NACES. Please find the member's list at <http://www.naces.org/members.htm>, chose one and request your evaluation. The results must be provided to the international department along with all other required documents. If you are in the U.S.A., we suggest that you use an evaluation company located in the U.S.A.
9. **International Student Previous Education/Training History Form IN-201A** - This form must be completed only if the student plans to request credits from previous education. Previous studies must be related to the industry. Academic transcripts must include: the number of hours attempted and completed, services completed, and the name and grades of the exams obtained. The Registrar Department at BSA will review your transcripts and determine if any hours will be credited. This process takes up to two (2) weeks from the date a completed transcript is received.
10. **Official Bank Letter of Financial Resources (for you and/or sponsor)** - Documentary evidence of means of financial support must be provided to the Institution for admission purposes and issuance of the *Certificate of Eligibility (I-20)*. The official bank letter (refer to the sample provided) must:
- ♦ Be written on bank letterhead and addressed to Beauty Schools of America[®] using the address of the campus you plan to attend.
 - ♦ Indicate that you and/or your sponsor have a bank account with sufficient funds to cover your expenses while you study at Beauty Schools of America[®].
 - ♦ Reflect the required amount for the program chosen (please refer to the *Tuition and Fees for International Students*).
 - ♦ Letter must be written in English and with the equivalent of U.S.A. dollars (USD) noted in the letter.
 - ♦ Be dated no more than three (3) months from the program start date. If for any reason the program start date is postponed, a current letter will have to be provided before issuance of the form I-20.
 - ♦ Include the account holder's number.
 - ♦ Reference the name of the applicant applying for the *Certificate of Eligibility (I-20)*.
11. **Sponsor Statement Form (IN-503)** - *if applicable*
- ♦ If using a sponsor, a Sponsor Statement is required to be completed. This form must clearly indicate the sponsor's intent to use the funds for applicants' expenses at Beauty Schools of America[®].
 - ♦ Ensure the signature and address of the sponsor is notarized with an official seal.
 - ♦ Have acceptable financial resources; funds that are immediately available to be withdrawn or used by the student as needed.
12. **Living Expense Letter** - Applicants must provide a letter including the estimated monthly living expenses while he/she will be studying at BSA. Please use the *Living Expense Letter form (IN-502)* which includes the following:
(Housing (rent) and utilities, transportation, food and miscellaneous.)

NOTE: The average cost of living expenses (rent, food, transportation and any miscellaneous costs) is estimated at \$2,000.00 per month. Applicants with dependents need to add an additional \$500.00 per month, per dependent. To calculate the total amount required on your bank letter, please refer to the *Estimated Costs of Living Expenses (Sample) Information Sheet*. Remember that it is very important to demonstrate that you have adequate funds to study in the United States, as well as sufficient funds to pay for living expenses and medical, if needed.

13. **U.S.A. Department of Homeland Security (DHS) Regulations BSA Form IN-504** - Applicants must complete the *U.S.A. Department of Homeland Security (DHS) Regulations BSA Form (IN- 504)*. The following are important regulations from U.S.A. DHS. All International M-1 applicants must:
- ♦ Prove that the intention to enter the United States is temporary, attend an approved vocational school/program and engage in a full course of study.
 - ♦ Not work without proper authorization according to the *United States Citizenship and Immigration Services (USCIS)* regulations.
 - ♦ Not transfer schools or work without the authorization of USCIS.
 - ♦ Have a passport valid for travel to the United States and with a validity date of at least six months beyond the applicant's intended period of stay in the United States.

- ♦ Keep a valid *Certificate of Eligibility (I-20)* for the duration of the program of study.
- ♦ Notify USCIS within 10 days of an address change.
- ♦ Maintain *Satisfactory Academic Progress (SAP)*. Please refer to the *Attendance and Satisfactory Academic Policy* section of the BSA catalog.
- ♦ Adhere to all DHS regulations, otherwise he/she may be reported as being out of status. For additional information refer to www.uscis.gov/portal/site/uscis.

14. **Statement of Non-Social Security Form IN-505** - This form notifies the school as to whether you have ever been issued a social security number in the United States. Please know that upon completion of all programs requirements and being that all M1 visa program regulations were followed, the student will receive a Diploma. BSA can only certify students if they have a Social Security number as this is a requirement by the Department of Business and Professional Regulations (DBPR). Should you need further information regarding this matter you may contact the Social Security Administration Office directly.

15. **Additional Documentation** - It is strongly recommended that you have available the items listed in the "Additional Suggested Documentation" form the day of your visit with the U.S.A. Embassy/Consulate. The USCIS Officer may ask you for certain documents listed on this form as a requirement to obtain the M1 student visa. Please find the embassy nearest you by either calling your country directory or searching on the World Wide Web.

NOTE: The International Package can be found on our website at www.bsa.edu in the International Student Admissions tab under Admissions. Please be aware that the *Certificate of Eligibility (Form I-20)* will be generated once our International Department receives a completed package.

SEVIS I-901 FORM

The SEVIS I-901 form and fee is mandated by Congress to support the program office and the automated system that keeps track of students and exchange visitors so that they can ensure that they maintain their status while in the United States. Applicants may choose to file the SEVIS I-901 form and make the required payment online at www.fmjfee.com or by mail. This non-refundable fee must be paid upon receiving your I-20; keep in mind that you should print out the receipt before you exit the I-901 website and keep it for your records to have it available the day of your appointment with the U.S.A. Embassy.

VISIT TO THE EMBASSY/CONSULATE

Request for an Appointment

To request an appointment you must have the following documents and present them the day of your appointment:

- ♦ The original I-20 form signed by the PDSO.
- ♦ A current bank letter of financial resources.
- ♦ Your passport valid for travel to the United States and with a validity date of at least six months beyond the applicant's intended period of stay in the United States.
- ♦ Receipt of your SEVIS I-901 payment.
- ♦ The additional suggested documents
- ♦ It is highly suggested that you contact the U.S.A. Embassy/Consulate in your country to obtain additional information that may be required to assure that you will be well prepared the day of your visit.
- ♦ To locate one of the U.S Embassies, Consulates and Diplomatic Missions please go to: www.usembassy.gov.
- ♦ It is your responsibility to review all documentation before you leave the Embassy/Consulate to assure that you have been issued the correct visa type, which is the M-1 Visa. Should you receive a wrong visa type, request a correction before you leave the Embassy.

Important: If you arrive to the U.S.A. with a visa type other than an M1, you must first request, either a change of status or a correction, directly with USCIS and before you may start attending BSA. Call the Primary School Official if you need further information.

ARRIVAL TO THE U.S.A.

I-94 Arrival/Departure Record Form - M-1 students must provide the International Department with the information about the electronic I-94 given by the U.S.A. Port of Entry record.

M-1 Visa – Passport - The passport must reflect the approved visa type (M-1), the approval and expiration dates, school name: Beauty Schools of America® (BSA), and the right location. Also, it should be valid for at least six months beyond the applicant's intended period of stay in the United States.

Late Arrivals - If the applicant selects a program that is 12 months in length, they must arrive to the U.S.A. and report to school not earlier than 5-10 calendar days prior to the program start date. This is very important because M1 applicants are allowed to be in the U.S.A. for a total of 12 months, or 30 days after the last day of attendance, whichever comes first. If a situation arise where the student cannot start classes on the Program Start Date as listed on the I-20, the student should request the International Department a deferral of the program start date. The SEVIS system automatically cancels immigration records of those students who do not start their program within the expected time. If so, the immigration record may be canceled and the applicant will have to apply for reinstatement.

STUDENT PAYMENT INFORMATION & BSA ORIENTATION

Student Tuition Payment Information - Tuition and fee payments may be arranged on a monthly basis. The first (1) payment is due on the first (1) day of class, and on the same day of every month thereafter.

NOTE: Federal financial aid is not available to international students.

Orientation - All BSA students are required to attend the *New Student Orientation* and complete all necessary paperwork. Orientation is conducted on the first day of class.

TRAVELING OUTSIDE THE U.S.A.

Traveling outside the United States as an M-1 Student - Due to regulations of the M-1 Visa program, an International student may leave the United States only while the school is closed as per the academic calendar published in the school catalog. If the student decides to leave for any reason while classes are in session, the I-20 may be terminated and the student will be required to re-apply for admission following the regulations of the M1 visa program. School is not responsible for any inconvenience caused when students leave the U.S.A. while still a student of BSA. Please refer to the school's calendar in the About the School section. For Frequently asked questions you may visit the following link http://www.ice.gov/sevis/travel/faq_m2.htm.

FLORIDA STATE BOARDS/COUNCILS & SOCIAL SECURITY

Florida State Boards and Electrolysis Council Licensing Requirements - Beauty Schools of America® follows all state licensing requirements. Upon completion of all program requirements, International students will receive a Diploma. Students who are interested in applying for a license in the State of Florida must complete an application with the Department of Business and Professional Regulations (DBPR). This application requires applicants to have a *Social Security Number (SSN)*. Beauty Schools of America® will certify students to apply for a license ONLY if students meet the requirements of the DBPR. BSA is not the entity which provides a license, it is the DBPR.

For additional information regarding licensing requirements for each Board/Council, please see below:

- ♦ **Board of Cosmetology**, which provides information about the following programs: Cosmetology, Spa Therapy (skin care portion), Full Specialist with Salon Management, Comprehensive Facial and Makeup, Electrolysis and Laser Technician (skin care portion), Makeup Artist and Skin Care, and Nail Technician program.
www.myfloridalicense.com/dbpr/pro/cosmo/index.html
- ♦ **Barbers' Board, which provides information about the Barber program:**
www.myfloridalicense.com/dbpr/pro/barb/index/html
- ♦ **Massage Therapy Board**, which provides information about the following programs:
Spa Therapy (massage portion) and the Massage Therapy program.
www.doh.state.fl.us/mqa/massage/
- ♦ **Electrolysis Council**, which provides information about the following programs:
Electrolysis and Laser Technician (electrolysis and the laser portion) and Electrolysis program.
www.doh.state.fl.us/mqa/electrolysis/index.html

Information regarding Social Security #'s in the U.S.A. - Application to obtain a Social Security Number in the U.S.A. must be submitted directly to the Social Security Administration Office. BSA does not deal with this process or is responsible in any way for this application. For information about this topic, please refer to www.ssa.gov/; an officer will be able to provide you with their requirements.

OPTIONAL PRACTICAL TRAINING (OPT)

International students are not permitted to work while attending school. Students may apply for *Optional Practical Training* (OPT) on Form I-765. The application must be submitted 90 days prior to the program end date. If the student is authorized by the *Department of Homeland Security* (DHS) to engage in employment for practical training, he or she will be issued an employment authorization document. The student may not begin employment until he or she has been issued an employment authorization document by USCIS. One month of employment authorization may be granted for each four months of full-time study that the student has completed. However, the student may not engage in more than six months of OPT.

APPLICATION TO EXTEND/CHANGE NONIMMIGRANT STATUS (FORM I-539)

This form is required by the *U.S.A. Department of Homeland Security* (DHS) and the *U.S.A. Citizen and Immigration Services* (USCIS) only if you are applying for a change of status or an extension of stay in the United States (U.S). You must read and follow all the instructions on the form and pay the proper fee. The form could be downloaded at www.uscis.gov.

CREDIT FOR PREVIOUS EDUCATION / TRAINING

This is only required if the applicant is requesting credit for previous education/training. Please keep in mind that an additional two (2) weeks will be added for processing of your I-20. If you are interested in requesting credit for your previous education/training the following procedure must be completed before processing and issuing applicants a *Certificate of Eligibility* (I-20).

Transfer of hours, services and grades from a previous institution - If requesting a credit, students must provide an official transcript, which should be mailed directly to the International department. When bringing the transcripts in person, they must be sealed. The transcripts must include the number of hours attempted and completed, which services were completed, as well as grades obtained for each course. Applicants must meet the minimum requirements listed below to be eligible to transfer coursework, although the minimum standards do not guarantee full or partial credit for your previous education. The final decision resides with the Registrar department. Please allow up to two weeks for the review process.

- ◆ Credits/clock hours completed
- ◆ Practical services completed
- ◆ 75% or higher on exams

NOTE: Applicants transferring may be required to complete additional hours, services and exams if their previous education does not meet our current program requirements, as well as the State of Florida.

Transferring hours, services and grades within our school - To receive credit for courses previously completed within our school, applicant must follow the same policy stated above. However, submission of an academic transcript is not required. Some of our programs contain educational components that are equivalent to one another. Those components may be transferable partially or in its entirety. The final decision resides with the Registrar department. In most cases, there are no prerequisites in regards to the order in which the student takes each phase of the program.

NOTE: The required hours for HIV are not transferrable, nor will the grade be credited. You must obtain a new HIV certificate for each program taken. If you obtain a certificate from outside (another) institution, which is current, Beauty Schools of America® (BSA) will give a grade of Pass, however you must still complete the hours; BSA is not responsible if it is not accepted by the Board or Council. If the certificate is not accepted then you will be required to take the course at BSA.

CERTIFICATION BY THE INTERNATIONAL THERAPY EXAMINATION COUNCIL (ITEC)

Beauty Schools of America® has been certified by the International Therapy Examination Council and approved for certification in various categories. If you are interested or would like more information on how to become ITEC certified, please inform your International Admissions Representative upon enrollment. You can also find additional information at www.itecworld.co.uk.

NOTE: Make the admissions representative aware of your interest in the ITEC program when applying to BSA; not after.

APPLYING FOR A SOCIAL SECURITY NUMBER (SSN), DRIVER'S LICENSE (DL) OR STATE IDENTIFICATION (ID), VISIT THE LINKS BELOW:

Information about Social Security Number (SSN)

<http://studyinthestates.dhs.gov/students/resources/social-security-number/>

Driving in the United States

<http://studyinthestates.dhs.gov/students/resources/driving>

DMV Fact Sheet

http://www.ice.gov/doclib/sevis/pdf/dmv_factsheet.pdf

Florida DMV License Requirements

<http://www.dmvflorida.org/drivers-license-identification.shtml>

SCHEDULE OF CLASSES

International students enrolled in a program that is 1000 hours or more must take at least 30 hours per week.

- ♦ **DAY SCHEDULE** – Available at all campuses
Monday – Friday: 8:30 am to 1:30 pm
- ♦ **AFTERNOON SCHEDULE** – Not available at all campuses
Monday – Friday: 12:00 pm to 5:00 pm
- ♦ **EVENING SCHEDULE** - Available at all campuses
Monday – Thursday: 5:45 pm to 10:00 pm
Saturday: 9:00 am to 5:00 pm

***MESSAGE STUDENTS ONLY:**

Monday – Thursday: 5:15 pm to 10:00 pm

Saturday: 9:00 am to 3:00 pm

- ♦ **WEEKEND SCHEDULE** – Not available at all campuses
Friday: 1:00 pm to 10:00 pm
Saturday & Sunday: 9:00 am to 5:00 pm

***NMB NAIL TECHNICIAN Students ONLY:**

Friday: 3:00 pm to 10:00 pm

Saturday & Sunday: 9:00 am to 6:00 pm

The following 30 hours/week day schedule is required for International Students enrolled in programs that are 1,000 hours or more:

DAY SCHEDULE – Available at all campuses
Monday – Friday: 8:30 am to 2:30 pm

*NOTE: The students in the Massage Therapy program and the Massage Therapy portion of the Spa Therapy program may not attend classes for more than 6 hours a day or 30 hours per week.

Please be advised that not all schedules are available for all programs and/or campuses. Contact your Admissions Representative for more details.

NOTE: The following 30 hour schedule will be effective as of 2.2.15.

- ♦ **DAY SCHEDULE** – Available at all campuses
[Except for the Spa Therapy (massage portion) and Massage Therapy programs]
Monday – Friday: 8:30 am to 2:30 pm
- ♦ **AFTERNOON SCHEDULE** – Not available at all campuses
Monday – Friday: 11:00 am to 5:00 pm

You may download the checklist and all forms at www.bsa.edu or request them from your International Admissions Representative.

<input type="checkbox"/> HIALEAH 1060 West 49th St Hialeah, FL 33012 305.362.9003	<input type="checkbox"/> MIAMI 1176 SW 67th Ave Miami, FL 33144 305.267.6604	<input type="checkbox"/> NORTH MIAMI BEACH 1813 NE 163rd St N. Miami Beach, FL 33162 305.947.0832	<input type="checkbox"/> HOMESTEAD 600 NE 22 Terr. #108 Homestead, FL 33030 305.231.2302	<input type="checkbox"/> SOUTH BEACH 1011 Fifth St Miami Beach, FL 33139 305.824.2500
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INTERNATIONAL STUDENT APPLICATION (IN-100)
SOLICITUD DEL ESTUDIANTE INTERNACIONAL (IN-100)

IMPORTANT: The form must be typed. Do not leave any blank spaces; write N/A if the question does not apply to you.
IMPORTANTE: El formulario debe ser escrito en el computador. No deje ningún espacio en blanco, escriba N/A si la pregunta no se aplica a usted.

Last Name: Apellido:	First: Nombre:	Middle Name: Segundo Nombre:
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(Foreign) Street Address: Dirección (Extranjera):		Apartment #: Apartamento #:
City: Ciudad:	Province: Provincia:	Postal Code: Código Postal:
Phone: Teléfono:	Home: Casa: ()	Work: Trabajo: ()
		Mobile: Celular: ()

(U.S.A.) Street Address: Dirección (en los EE.UU.):		Apartment #: Apartamento #:
City: Ciudad:	State: Estado:	Postal Code: Código Postal:
Telephone #: Número de Teléfono:	Home: Casa: ()	Work: Trabajo: ()
		Mobile: Celular: ()

Country of Birth: País de Nacimiento:	Country of Citizenship: País de Ciudadanía:
Driver's License Number: Número de Licencia de Conducir:	Driver's License Issue State: Estado de Donde a Obtenido su Licencia de Conducir:

E-Mail: Correo Electrónico:	Gender: Género:	<input type="checkbox"/> Male Masculino	<input type="checkbox"/> Female Femenino	Date of Birth: Fecha de Nacimiento:
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High School/College/University Graduation Date (MM/YYYY):
Fecha de Graduación de la Escuela Superior/Colegio/Universidad (MM/AAAA):

What school did you attend? (Include City, Province, and Country): / ¿En cuál escuela estudio? (Incluya la ciudad, provincia, y país):

Name of School / Nombre de la Escuela	City / Ciudad	Province / Provincia	Country / País
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How did you hear about Beauty Schools of America®? ¿Cómo se enteró de Beauty Schools of America®?	<input type="checkbox"/> Newspaper Periódico	<input type="checkbox"/> Radio Radio	<input type="checkbox"/> Internet Internet	<input type="checkbox"/> Mailing Por Correo	<input type="checkbox"/> Friend Amistad	<input type="checkbox"/> Family Familia
	<input type="checkbox"/> Employee Empleado	<input type="checkbox"/> Student Estudiante	<input type="checkbox"/> TV Televisión	<input type="checkbox"/> Other Otro _____		

Please check one: Por favor marque una:	<input type="checkbox"/> Have not attended or accumulated hours at another school and will not claim previous training hours. No he acumulado horas o asistido a otra escuela y no voy a reclamar horas previas de entrenamiento.
	<input type="checkbox"/> Have accumulated hours at another school, but wish to enroll at BSA for full program. He asistido a otra escuela, pero deseo hacer el programa de estudio completo.
	<input type="checkbox"/> Have accumulated hours at another school and wish to be evaluated to receive credit for them (please refer to the section titled "Credit for Previous Education/Training"). He asistido a otra escuela y deseo ser evaluado para poder recibir crédito de horas (por favor refiérase a la sección titulada "Crédito para la Educación Anterior/Formación").

Social Security Number (<u>only</u> the last 4 digits): Número de Seguro Social (<u>sólo</u> los últimos 4 dígitos): _____	Individual Tax Payer ID #: El numero de ID de impuestos individual: _____
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Are you able to support yourself or have a sponsor during your stay in the United States? ¿Tienes los fondos para mantenerse o un patrocinador durante su estancia en los Estados Unidos?	<input type="checkbox"/> Yes / Sí	<input type="checkbox"/> No / No
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Are you aware that all programs will bring you into contact with chemicals? ¿Usted está consiente que todos los programas contienen uso de químicos?	<input type="checkbox"/> Yes / Sí	<input type="checkbox"/> No / No
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Please write any medical problems or allergies:
Por favor escriba problemas médicos o alergias: _____

NOTE: If yes, you must also fill-out the Medical Release form. / Note: Si es así, usted debe de llenar el formulario de Medical Release.

What program are you interested in? ¿Curso en que está usted interesado?

- | | |
|--|--|
| <input type="checkbox"/> Cosmetology / Cosmetología | <input type="checkbox"/> Medical Esthetician / Médico Esteticista |
| <input type="checkbox"/> Barber / Barbería | <input type="checkbox"/> Electrolysis and Laser Technician / Electrólisis y Técnico de Laser |
| <input type="checkbox"/> Spa Therapy / Terapia de Spa | <input type="checkbox"/> Electrolysis / Electrólisis |
| <input type="checkbox"/> Full Specialist with Salon Management / Especialista Completo con Administración de Salón | <input type="checkbox"/> Makeup Artist and Skin Care / Maquillaje Artístico y Cuidado de la Piel |
| <input type="checkbox"/> Comprehensive Facial and Makeup / Programa Completo de Faciales y Maquillaje | <input type="checkbox"/> Makeup Artist Specialist / Especialista de Maquillaje Artístico |
| <input type="checkbox"/> Massage Therapy / Terapia de Masaje | <input type="checkbox"/> Nail Technician / Técnico de Uñas |

U.S.A. contact name and number in case of emergency:

Nombre y número de teléfono de contacto en caso de emergencia: _____

Foreign contact name and number in case of emergency:

Nombre y número de teléfono de contacto en caso de emergencia: _____

Anticipated Start Date / Fecha Prevista de Inicio: _____

In the event that your telephone number is registered on the National Do Not Call Registry, the signature below gives us consent for BSA to call you for 18 months or up until the designated time of your class start, whichever comes later. A parent must sign for any student under the age of 18 years of age. / En caso de que su teléfono esté registrado en el Registro Nacional "No Llame", al firmar este documento usted da consentimiento a BSA para llamarle; por los próximos 18 meses, hasta el comienzo de clases, o hasta el período de tiempo que más se extienda entre los dos. El padre, la madre, o el tutor debe firmar por cualquier estudiante que sea menor de 18 años.

By signing this form you authorize Beauty Schools of America® to communicate with you via e-mail about events, services, offers, and news pertaining to our school and its programs. We will not sell, distribute or lease your personal information to third parties unless we have your permission or are required by law to do so. / Al firmar esta forma, usted autoriza a Beauty Schools of America® comunicarse con usted via e-mail acerca de eventos, servicios, ofertas, y noticias relacionadas con nuestra institución y sus programas. No venderemos o rentaremos su información personal a terceras personas a menos que tengamos su permiso o sean requeridos por la ley.

Applicant Signature / Firma del Apicante: _____

Date / Fecha (MM-DD-YYYY): _____

Parent Signature / Firma del Padre (Tutor): _____

Date / Fecha (MM-DD-YYYY): _____

References / Referencias (one reference must be from the U.S.A. / una referencia debe ser de los EE.UU.):

Name: Nombre:	Relationship: Relación:
U.S.A. Address: EE.UU. Dirección:	U.S.A. Phone: EE.UU. Teléfono: ()
U.S.A. City: EE.UU. Ciudad:	U.S.A. State: EE.UU. Estado:

Name: Nombre:	Relationship: Relación:
Address: Dirección:	Phone: Teléfono: ()
City: Ciudad:	Country: País:

Name: Nombre:	Relationship: Relación:
Address: Dirección:	Phone: Teléfono: ()
City: Ciudad:	Country: País:

BSA does not discriminate on the basis of race, color, ethnicity, national origin, religion, creed, sex, age, marital status, parental status, physical disability, learning disability, political affiliation, veteran status, or sexual orientation. / BSA no discrimina en base de raza, color, etnicidad, origen nacional, creencias, sexo, edad, estatus marital, status de padre, incapacidad física, , incapacidad de aprendizaje, afiliación política, estatus veterano, u orientación sexual.

Applicant Signature / Firma del Apicante

Date / Fecha (MM-DD-YYYY)

Admissions Representative Name (Printed)

Date / Fecha (MM-DD-YYYY)

MEDICAL RELEASE

TO: Coral Springs Schools, Inc., d/b/a Beauty Schools of America® ("BSA"):

Student's Name: _____ SS#: _____

Program of Study: _____ Date: _____

I notify the authorized official of the school that I have a medical condition as described below:

I shall be accepted to the school as a student to complete my studies; I understand and acknowledge that I must bring a Doctor's note which states that I am permitted to safely start, continue or return to my studies.

I understand and acknowledge that due to the nature and requirement of BSA's program, there shall be theory and practical classes during which I shall be standing most of the time. I acknowledge that the Campus Director of BSA interviewed me and explained the school's policies regarding disability and safety.

If I am not able to provide a Doctor's note to the officials and staff of BSA, I understand, acknowledge and agree to assume any and all risks, damages and liabilities, of attending school at BSA. I understand and acknowledge that I may be exposed to a) theoretical and practical classes, which shall require me to stand for long periods of time, b) various noxious and hazardous chemicals, solvents, dyes, peroxides and other dangerous substances and; c) cutting equipment such as scissors, razors, blades, cuticle cutters, irons, dryers, blowers, mirrors and others.

I agree to release, indemnify and hold BSA harmless from and against any and all claims, third-party claims, demands, suits, actions, and proceedings and any and all liabilities, losses, damages, costs and expenses (including, without limitation, reasonable attorneys' fees) arising from or relating the aforementioned release.

I represent and warrant that I have the full right and authority to enter into this release.

Student's Address: _____

Student's Signature: _____

I have interviewed the above named prospect/student and based on the information and/or documentation I have obtained I approve his/her to attend classes.

Campus Director's Name: _____ Signature: _____

Date: _____

APPLICANT DECLARATION

All applicants must agree to the following:

1. If Beauty Schools of America® finds that an applicant has made a false or fraudulent statement or a deliberate omission on any document, that applicant will be denied admission. If the applicant is enrolled when such a fraud is discovered, then the student may be immediately withdrawn (with no refund), denied further enrollment, and invalidated on hours earned (including services and grades) and any diploma based on such hours.
2. Applicants are reasonably expected to:
 - a. Observe demonstrations (at a distance and up close) and participate
 - b. Demonstrate sufficient use of sense of vision and hearing
 - c. Be able to communicate verbally and in written form, such as obtaining a medical history from clients and with instructors
 - d. Perceive relevant non-verbal communications, such as mood and posture from the client
 - e. Have reading, writing, and verbal skills (in English or Spanish) at a level sufficient that you are able to complete all the program requirements; such as exams and the comprehension of instructions from the instructor
 - f. Have the ability to stand and sit for long periods of time
 - g. Maintain regular, reliable and punctual attendance for the entirety of the program
 - h. Have the dexterity to perform all service requirements of the program

Further, I certify that I understand all the information provided to me on this form.

Applicant's Full Name (PRINT)

Date (MM-DD-YYYY)

Applicant's Signature

BSA I-20 APPLICATION (FORM IN-500)

IMPORTANT: The form must be typed. Do not leave any blank spaces; write N/A if the question does not apply to you.

TYPE OF VISA APPLYING FOR: New student Change of status Transfer student

I AM APPLYING FOR MY M1 VISA: In my home country In the U.S.A., which status (visa type) do you currently have?

 (you may be required to request a change of status)

APPLICANT INFORMATION:

Last name:	First name:	Middle name:
Date of birth (MM-DD-YYYY)	Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of birth:	Country of citizenship:	

PLEASE NOTE:

You must understand, write, and speak either English or Spanish to be admitted as a student of Beauty Schools of America®.

PLEASE INDICATE PREFERRED LANGUAGE:	English <input type="checkbox"/>	Spanish <input type="checkbox"/>
--	----------------------------------	----------------------------------

FOREIGN ADDRESS:

Street Address:	City:	Province:
Postal Code:	Country:	Phone:

U.S.A. ADDRESS:

Street Address:	City:	Province:
Postal Code:	Country:	Phone:

PROGRAM OF STUDY:	SCHOOL (CAMPUS) APPLYING TO:
Passport No:	Issue Country: Exp. Date (MM-DD-YYYY):

DEPENDANT INFORMATION (ONLY FILL THIS OUT SECTION IF SPOUSE/CHILD WILL BE INCLUDED ON THE I-20):

Last name:	First name:	Middle name:
Date of birth (MM-DD-YYYY)	Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of birth:	Country of citizenship:	
RELATIONSHIP:	Spouse <input type="checkbox"/>	Child <input type="checkbox"/>

If you have more than one dependent, you must provide the information above for each one on a separate supplemental sheet (FORM IN-500A)

I would like to have my SEVIS I-20 form released in the following manner. (Please choose only one option)

MAIL THE SEVIS I-20 FORM TO THE: U.S.A. Mailing Address Foreign Address
I WILL PICK UP THE SEVIS I-20 FORM.

I certify that all the information provided on this application is true to the best of my knowledge. In addition, I agree to abide by the policies, procedures, rules and regulations of Beauty Schools of America®.

Applicant Signature

Date (MM-DD-YYYY)

**DEPENDENT SUPPLEMENTAL
(FORM IN-500A)**

DEPENDENT (IFAPPLICABLE) INFORMATION:

Last name:	First name:	Middle name:
Date of birth (MM-DD-YYYY)	Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of birth:	Country of citizenship:	
RELATIONSHIP:	Spouse <input type="checkbox"/>	Child <input type="checkbox"/>

DEPENDENT (IFAPPLICABLE) INFORMATION:

Last name:	First name:	Middle name:
Date of birth (MM-DD-YYYY)	Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of birth:	Country of citizenship:	
RELATIONSHIP:	Spouse <input type="checkbox"/>	Child <input type="checkbox"/>

DEPENDENT (IFAPPLICABLE) INFORMATION:

Last name:	First name:	Middle name:
Date of birth (MM-DD-YYYY)	Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of birth:	Country of citizenship:	
RELATIONSHIP:	Spouse <input type="checkbox"/>	Child <input type="checkbox"/>

DEPENDENT (IFAPPLICABLE) INFORMATION:

Last name:	First name:	Middle name:
Date of birth (MM-DD-YYYY)	Gender	Female <input type="checkbox"/> Male <input type="checkbox"/>
Country of birth:	Country of citizenship:	
RELATIONSHIP:	Spouse <input type="checkbox"/>	Child <input type="checkbox"/>

ACKNOWLEDGEMENT OF RESPONSIBILITIES AND LIABILITY NOTICE
(FORM IN-500B)

By signing below, I confirm that I have received, read, and understand the following:

Maintain the guidelines outlining the responsibilities for M-1 students to maintain legal M-1 status in the United States while studying at Beauty Schools of America® (BSA). I further understand by signing the BSA Agreement Enrollment, that failure to comply with these guidelines and regulations can and will result in loss of legal status in the United States. Furthermore, I acknowledge that in consideration and as a condition of my acceptance to BSA, I have an obligation to meet with a Primary Designated School Official (PDSO) at the International department for any and all advising related to M-1 matters. The PDSO is not an "Advocate" or "Representative" for the student in any legal capacity.

I understand that PDSO, DSOs and other BSA employees do not provide legal advice to students. Therefore, I hereby release all DSO's and employees of BSA of any and all liabilities resulting from the advice given by a PDSO, DSO or staff member of the International department. All matters relating to the immigration status of the student is the student's responsibility, not the responsibility of BSA. If a student has an immigration issue that requires legal advice, he or she is encouraged to seek outside legal counsel from a qualified immigration attorney.

Applicant's Full Name (PRINT)

Date (MM-DD-YYYY)

Applicant's Signature

STUDENT'S ROLE AND RESPONSIBILITIES
FOR COMPLIANCE WITH M-1 LAWS AND REGULATIONS (FORM IN-500C)

The U.S.A. Federal Government regulations state how international M-1 students must maintain status. Failure to follow these regulations could result in your M-1 status being terminated. The outline below provides an overview of the student's responsibilities for maintaining status in the United States while studying at Beauty Schools of America® (BSA).

All must:

- ◆ Maintain your contact information up-to-date. Students must maintain their email address, phone numbers and mailing addresses at the BSA International department at all times.
- ◆ M-1 related documentation, such as a valid passport and the SEVIS I-20 Form.
- ◆ Notify the Primary Designated School Official (PDSO) of any change in information, including academic, demographic, and legal information within 10 days of the change.
- ◆ Maintain a full course of study at all times and have satisfactory academic progress (SAP). Students must maintain a minimum grade point average (GPA) of at 2.0 or higher, as stated in the BSA catalog.
- ◆ An M-1 visa student may not travel at any time during their enrollment without consulting with the PDSO for the applicable regulations. The Christmas break (as indicated in the BSA catalog) is the only time considered a vacation.
- ◆ Depart the United States in a timely manner (within 30 days) after completion of your program or from end of program date as indicated on the BSA Enrollment Agreement (whichever one comes 1st), you must make sure not to exceed 12 months from date of arrival. For the exact departure dates consult with the PDSO.
- ◆ Work only with the appropriate authorization. Follow the guidelines given by PDSO to apply for Optional Practical Training (OPT).
- ◆ Have a valid travel signature/endorsement on your SEVIS I-20 Form before leaving and re-entering the U.S.A.
- ◆ Check your email address periodically that you provided to the International department for updates, questions, etc.

I certify that I have read and understand the above information. If I have any questions or changes I will contact the PDSO immediately. Furthermore, I understand that all changes requested must be submitted in writing to the International department.

 Applicant's Full Name (PRINT)

 Date (MM-DD-YYYY)

 Applicant's Signature

TUITION AND FEES FOR INTERNATIONAL STUDENTS

Program	Clock Hours	Months	Weeks	Application Fee (non-refundable)	Registration	Tuition	Equipment	Books	Processing Fee	Total
Cosmetology	1,200	9.5-11	40-48	\$ 100.00	\$ 100.00	\$ 14,473.80	\$ 1,037.30	\$ 500.00	\$ 400	\$ 16,611.10
Barber	1,200	9.5-11	40-48	\$ 100.00	\$ 100.00	\$ 14,473.80	\$ 1,037.30	\$ 500.00	\$ 400	\$ 16,611.10
Spa Therapy	1,054	8-10	35-42	\$ 100.00	\$ 100.00	\$ 12,072.60	\$ 577.33	\$ 337.00	\$ 400	\$ 13,586.93
Full Specialist	900	7-8.5	30-36	\$ 100.00	\$ 100.00	\$ 12,042.17	\$ 520.50	\$ 329.00	\$ 400	\$ 13,491.67
Comprehensive Facial and Makeup	900	7-8.5	30-36	\$ 100.00	\$ 100.00	\$ 12,272.00	\$ 357.50	\$ 217.00	\$ 400	\$ 13,446.50
Medical Esthetician	750	6-7	25-30	\$100.00	\$100.00	\$11,579.01	\$520.50	\$329.00	\$400	\$13,028.51
Massage Therapy	754	6-7	25-30	\$ 100.00	\$ 100.00	\$ 9,144.12	\$ 219.83	\$ 120.00	\$ 400	\$ 10,083.95
Electrolysis and Laser Technician	650	5-6	21-26	\$ 100.00	\$ 100.00	\$ 7,587.32	\$ 462.50	\$ 532.00	\$ 400	\$ 9,181.82
Electrolysis	320	2.5-3	10.5-13	\$ 100.00	\$ 100.00	\$ 2,500.00	\$ 105.00	\$ 315.00	\$ 400	\$ 3,520.00
Makeup Artist and Skin Care	300	2.5-3	10-12	\$ 100.00	\$ 100.00	\$ 2,792.58	\$ 357.50	\$ 217.00	\$ 400	\$ 3,967.08
Makeup Artist Specialist	300	2.5-3	10-12	\$100.00	\$100.00	\$2,792.58	\$357.50	\$217.00	\$400	\$3,967.08
Nail Technician	240	2-2.5	8-10	\$ 100.00	\$ 100.00	\$ 750.00	\$ 163.00	\$ 112.00	\$ 400	\$ 1,625.00

Program	Total Tuition & Fees	Down Payment	Monthly Payment	Minimum Amount Required on Bank Letter (see Estimated Costs of Living Expense Sample Information Sheet)
Cosmetology	\$ 16,611.10	\$ 2,037.30	7 pmts. of \$ 1,809.00 1 pmt. of \$1,810.80	\$ 40,000.00
Barber	\$ 16,611.10	\$ 2,037.30	7 pmts. of \$ 1,809.00 1 pmt. of \$1,810.80	\$ 40,000.00
Spa Therapy	\$ 13,586.93	\$ 1,414.33	6 pmts. of \$ 1,724.00 1 pmt. of \$ 1,728.60	\$ 38,000.00
Full Specialist	\$ 13,491.67	\$ 1,349.50	6 pmts. of \$ 1,720.00 1 pmt. of \$ 1,722.17	\$ 35,000.00
Comprehensive Facial and Makeup	\$ 13,446.50	\$ 1,074.50	6 pmts. of \$ 1,753.00 1 pmt. of \$ 1,754.00	\$ 35,000.00
Medical Esthetician	\$13,028.51	\$1,074.50	4 pmts. of \$2,370.00 1 pmt. of \$2,374.01	\$35,000.00
Massage Therapy	\$ 10,083.95	\$ 839.83	4 pmts. of \$ 1,828.00 1 pmt. of \$ 1,832.12	\$ 28,000.00
Electrolysis and Laser Technician	\$ 9,181.82	\$ 1,494.50	4 pmts. of \$ 1,517.00 1 pmt. of \$ 1,519.32	\$ 20,000.00
Electrolysis	\$ 3,520.00	\$ 920.00	2 pmt. of \$ 1,250.00	\$ 12,000.00
Makeup Artist and Skin Care	\$ 3,967.08	\$ 1,074.50	1 pmt. of \$ 1,396.00 1 pmt. of \$ 1,396.58	\$ 12,000.00
Makeup Artist Specialist	\$3,967.08	\$1,074.50	1 pmt. of \$ 1,396.00 1 pmt. of \$ 1,396.58	\$ 12,000.00
Nail Technician	\$ 1,625.00	\$ 775.00	1 pmts. of \$ 750.00	\$ 10,000.00

NOTE: Application (non-refundable) fee and down payment must be paid via wire transfer to the International School Account. Student payments must be made with a check, money order, or cashier's check (must be from a U.S.A. bank), or with any of the following credit cards: Visa, Master Card, American Express and Discover. Cash is accepted when payment is made at the school, in person. The amount required on the financial letter is based on an estimated expense of program tuition and fees, books and supplies, student's room and board, transportation and personal expenses. Amounts above are subject to change without previous notice. Tuition and fee changes that will apply are the current fees as of the day the student signs the school Enrollment Agreement. First payment is due on the first day of class and any refunds will be calculated in accordance to the school Enrollment Agreement. The non-refundable Application Fee is due with submission of Form IN-100; down payment is due with submission of a "completed I-20 Package." For further information on refunds please contact the Fiscal department at the campus you enrolled.

INTERNATIONAL STUDENT EDUCATIONAL HISTORY
(FORM IN-501)

APPLICANT'S FULL NAME: _____

DATE OF BIRTH (MM-DD-YYYY): _____

PREVIOUS EDUCATION

NOTE: Please note that if you are applying for any of our programs, you must submit your High School Diploma; this is an Admissions requirement of Beauty Schools of America®.

HIGH SCHOOL/COLLEGE INFORMATION

HIGH SCHOOL/COLLEGE NAME: _____

PROVINCE AND COUNTRY: _____

GRADUATION DATE (MM-YYYY): _____

CREDENTIAL OBTAINED: _____

OTHER VOCATIONAL SCHOOL INFORMATION
(ONLY IF RELATED TO THE COSMETOLOGY/BARBER/SPA INDUSTRY)

Fill out this section ONLY if you are requesting that the school evaluate your academic transcript to determine if hours, examinations, and/or services will be credited, as stated in the Beauty Schools of America®. Academic Transcript MUST include the number of hours attained, services completed, and the name of the exams with the grades obtained. An Official Academic Transcript MUST be attached to this form and it MUST be translated by a certified English translator. If you are not applying for an academic evaluation of your transcript, please write N/A in the space below.

NAME OF SCHOOL: _____

PROVINCE AND COUNTRY: _____

PROGRAM OF STUDY: _____

LAST DAY OF ATTENDANCE (MM-YYYY): _____

GRADUATION DATE (MM-YYYY): _____

NOTE: The Certificate of Eligibility (Form I-20) will take an additional two (2) weeks from the time the transcripts are received. The transcript must include the number of hours attempted and completed, services completed, as well as grades and names of exams for each course taken. Applicants must meet the minimum requirements, as stated on the catalog, to be eligible coursework, although the minimum standards do not guarantee full or partial credit for your previous education. The final decision resides with the Registrar's department. When bringing transcripts in person, they must be sealed.

**INTERNATIONAL STUDENT PREVIOUS EDUCATION / TRAINING HISTORY
(FORM IN-501A)**

APPLICANT'S FULL NAME: _____

DATE OF BIRTH (MM-DD-YYYY): _____

PREVIOUS EDUCATION / TRAINING HISTORY

Fill-out this form **ONLY** if requesting to transfer hours, services, and/or grades from another institution. Applicant must provide an official transcript, which should be mailed directly to the International department.

**VOCATIONAL SCHOOL INFORMATION
(ONLY IF RELATED TO THE COSMETOLOGY/BARBER/SPA INDUSTRY)**

The school will evaluate your academic transcript to determine if hours, examinations, and/or services will be credited, as stated in the Beauty Schools of America® catalog. Academic Transcript MUST include the number of hours attempted and completed, services completed, and the name of the exams with the grades obtained. An Official Academic Transcript MUST be attached to this form and it MUST be translated by a certified English translator. If you are not applying for an academic evaluation of your transcript, please write N/A in the space below.

NAME OF SCHOOL: _____

PROVINCE AND COUNTRY: _____

PROGRAM OF STUDY: _____

LAST DAY OF ATTENDANCE (MM-YYYY): _____

GRADUATION DATE (MM-YYYY): _____

NOTE: The Certificate of Eligibility (Form I-20) will take an additional two (2) weeks from the time the transcripts are received. Applicants coming from another school may be required to complete additional hours, services, and exams if their previous education does not meet our current program requirements. Applicants must meet the minimum requirements, as stated in the catalog, to be eligible coursework, although the minimum standards do not guarantee full or partial credit for your previous education. The final decision resides with the Registrar's department.

OFFICIAL BANK LETTER SAMPLE
BANK LETTERHEAD

Date (mm-dd-yyyy)

Beauty Schools of America®
(Campus address you will attend)

RE: (Name of International Applicant)

Dear Sir/Madam,

As per the request of our customer (Sponsor's Full Name) whose local address is (Sponsor's complete address), it is our pleasure to notify you of his/her banking relationship with our bank.

(Sponsor's Full Name) has had accounts with our bank since (mm/dd/yyyy) and has maintained the accounts in good standing. This account currently has a minimum balance equivalent to (Amount in U.S.A. dollars) USD (NOTE: See required amount for selected program.)

(Sponsor's Full Name) will be providing tuition and living expenses for (Applicants Full Name) while his/her relationship is attending Beauty Schools of America®, in the amount of \$ _____ USD.

Sincerely,

BANK OFFICIAL SIGNATURE

OFFICIAL SEAL

NOTE:

If letter from the bank is from the student's sponsor:

(Sponsor's Name) will be providing tuition and living expenses for (International Applicant's name) while he/she is attending Beauty Schools of America®.

If letter from the bank is from the International Applicant:

(International Applicant's Name) will be paying for tuition and living expenses while he/she is attending Beauty Schools of America®.

If you have any questions please do not hesitate to contact us at your earliest convenience.

LIVING EXPENSE LETTER (OFFICIAL)

DATE (MM-DD-YYYY): _____

TO: Beauty Schools of America®

FROM: _____

I, _____ for my stay in the United States (U.S.A.), will provide for my living expenses for the _____ months I will be studying at Beauty Schools of America®.

- Remaining Balance Tuition Due (Not including application fee and down payment) :
\$ _____
- Monthly Housing Amount \$ _____ X Program Length in Months = \$ _____
- Monthly Food Cost: \$ _____ X Program Length in Months = \$ _____
- Monthly Transportation Cost: \$ _____ X Program Length in Months = \$ _____
- Monthly Miscellaneous Cost: \$ _____ X Program Length in Months = \$ _____
- Monthly Dependent Cost: \$ _____ X Program Length in Months = \$ _____
(only if applicable – need to add \$500.00 per month, per dependent)

My living expenses while I study in the USA is estimated at \$ _____ which includes the remaining balance tuition of \$ _____.

If you need additional information, you can contact me at:

Sincerely,

Signature of Applicant

Form IN-504

Note: Please refer to the Estimated Costs of Living Expense Information.

ESTIMATED COSTS OF LIVING EXPENSE (SAMPLE) INFORMATION SHEET

Please note the chart below is ONLY an estimation and a sample of the costs that you will incur while studying in the U.S.A. and may vary depending on your needs. For the minimum amount required on the Living Expense Letter please refer to the International Department Tuition and Fees form.

Expenses	Amount	Multiply	Program Length in Months (example used is for Cosmetology & Barber)	Total Cost
Tuition & Fees	\$16,111.10	N/A	N/A	\$ 16,111.10
Housing	Starting @ \$700.00 (studio size)	X	12 months	\$ 8,400.00
Food	Starting @ \$400.00	X	12 months	\$ 4,800.00
Transportation	Starting @\$200.00 (public)	X	12 months	\$ 2,400.00
Miscellaneous	\$700	X	12 months	\$ 8,400.00
Grand Total:				\$ 40,111.10
Dependent	\$500 (per each one)	X	12 months	\$ 6,000.00
Grand Total:				\$ 46,111.10

NOTE: To use the chart above simple replace the amounts and the program length that correspond to the program you are applying for. Applicants with dependents need to add an additional \$500.00 per month, per dependent.

SPONSOR'S STATEMENT (FORM IN-503)

NOTICE TO APPLICANT: If you have more than one sponsor, each sponsor must complete this form and a sponsor letter along with the bank letter.

1. APPLICANT'S INFORMATION:

Please make sure that your name appears the same as on your passport. Your name on the passport and the BSA I-20 Application Form IN-500 must match.

Last Name: _____ First Name: _____

Program of study: _____ Campus: _____

2. SPONSOR'S INFORMATION:

Last Name: _____ First Name: _____

Sponsor's relationship to applicant:

Father Mother Other (please specify): _____

Amount of funds available, in U.S.A. Dollars (specify amount): _____

Date form completed (MM/DD/YYYY): ____/____/____

SPONSOR'S STATEMENT: I certify that I am the sponsor of the applicant. I verify that I have sufficient funds as indicated below to meet the educational and living requirements of the applicant during the period of study at Beauty Schools of America®. I understand that I must have my bank information provide a letter (on their letterhead) verifying the availability of funds.

Sponsor's Signature: _____

3. APPLICANT'S FUNDS:

Please indicate below the source of your funds.

NOTICE TO APPLICANT: Applicant funds must submit one or more of the following documents to equal the required funding amount.

Bank statement for your checking account and/or other accessible bank account(s)

If other, please explain: _____

NOTE: All bank statements must be original, in English, in U.S.A. Dollars, and dated no older than 3 months.

SPONSOR'S CHECKLIST

If you are using family or friends sponsor:

- ♦ **A sponsor's statement and bank documents are required of all sponsors. The sponsor statement must include the following:**
 - A statement that the sponsor will financially support the applicant.
 - Applicant's name.
 - Sponsor's name.
 - Sponsor's signature and date.

- ♦ **The sponsor must submit these documents to equal the required funds:**
 - A bank statement for checking or other accessible account(s) – need to specify the type of account “other” is/are.
 - A bank letter containing the account(s) number(s) and the currency must be in U.S.A. dollars.
 - A U.S.A. sponsor must submit a sponsor letter.

IF YOU ARE USING A PRIVATE COMPANY SPONSOR THE FOLLOWING ITEMS WILL BE EQUIRED:

- ♦ **A statement (on their company letterhead) verifying that the business will financially support the applicant.**
 - The statement should include the applicant's full name and the responsible official's signature.

- ♦ **A bank letter showing the name of the sponsor(s) as an account holder for the business.**
 - The account number and any documentation supporting the funds.

PLEASE MAKE SURE TO MAIL THIS FORM ALONG WITH ALL THE ORIGINAL DOCUMENTATION TO:

Beauty Schools of America®

ATTN: International Department

1176 S.W. 67TH Avenue

Miami, Florida 33144

OFFICIAL SPONSOR LETTER SAMPLE

[Sponsors Name]

[Sponsors Complete Address]

Date (mm-dd-yyyy):

Beauty Schools of America®
International Department

[Campus address you will attend]

Re: [Name of International Applicant]

Dear Sir/Madam:

I, (Sponsor's Full Name) whose local address is stated above, I certify that I will be providing tuition and living expenses for (Applicants Full Name) while his/her (relationship to Applicant) is attending Beauty Schools of America® in the amount of \$ (amount must be in USD).

Sincerely,

[Sponsors Signature]

**U.S.A. DEPARTMENT OF HOMELAND SECURITY (DHS) REGULATIONS
(FORM IN-504)**

These are important school policies and/or regulations related to the U.S.A. DHS and SEVIS.

I, _____, an International Student Applicant (I-20) understand that as an M-1 student (once I am approved) I must leave the United States within 30 days from my last day of attendance, and/or the expiration day of my current visa, unless I apply and get approved for an extension of stay for a longer period of time in the United States (extension fees may apply). These are regulations from the Student and Exchange Visitor Information System (SEVIS) and the Homeland Security.

In addition, I have been explained by my Designated School Official (DSO) that as an International Student with an M-1 visa, I must complete all program requirements no later than the date shown on my M-1 student visa official document.

You must contact the International Department within 48 hours of your arrival to schedule a meeting at the campus of your choice. It is important that you report to the school upon arrival into the United States.

I further understand that I must comply with Beauty Schools of America®'s regulations with respect to Satisfactory Academic Progress (SAP), Attendance Policy, Payment Plan, Conduct, and all School Policies, Procedures, Rules and Regulations.

Applicant's Signature: _____

Date (mm-dd-yyyy): _____

STATEMENT REGARDING NON-SOCIAL SECURITY NUMBER

I, _____ by signing this statement certify that I do not possess a social security number (SSN).

I understand that once I have completed all program requirements, Beauty Schools of America® will provide me with my diploma only after I have fulfilled all educational and financial obligations.

Beauty Schools of America® (BSA) follows all state licensing requirements. The certification is one of the first steps to apply for a Florida license. I understand that in order for BSA to certify me, I must possess a SSN. To view the requirements to obtain a SSN please refer to www.ssa.gov.

Student's Name (Print)

Student's Signature

Date (MM-DD-YYYY)

ADDITIONAL SUGGESTED DOCUMENTATION

The additional suggested documentation listed below is strongly recommended that you submit along with your documentation for the interview at the Embassy. Please find the embassy nearest you by either calling your country directory or searching on the World Wide Web.

1. Your ties in your country or outside the U.S.A.:

- ◆ Documentation that shows you, your family, and/or your sponsor have strong social ties in your Country.
- ◆ Letters from different social organizations that you, your sponsor, and/or your family belong to.

2. Your families ties in your country or outside the U.S.A.:

- ◆ If you have your own family; spouse, children, please include it on your letter.
- ◆ Explain your plan, such as; you want to study here to obtain a higher education, better yourself and provide a more stable future financially for your family and/or yourself.

3. Your sponsors ties in your country or outside the U.S.A.:

- ◆ Documentation that shows they have a strong economic ties in your Country and/or outside the U.S.A.
- ◆ Additional letters (strongly recommended) that show that you and/or your sponsor have enough financial stability in your Country or outside the U.S.A. and sufficient financial resources to pay for your studies, room, board and personal expenses while you study in the United States.

4. Letter that shows the value of the program of study at BSA in your Country or outside the U.S.A.:

- ◆ Present a letter that shows the value the program of study chosen at Beauty Schools of America® has in your Country.
- ◆ Explain what your plans in your Country or outside the U.S.A. once you graduate.
- ◆ State the number of Salons and/or Spas in your area and the salaries (in U.S.A. currency) paid to these professionals.
- ◆ If you are able to obtain a letter from one or two salons/spas/barbershops stating the salary paid, might be helpful.
- ◆ If you already have a salon in mind where you are planning to work; a letter from them stating they plan to hire you once you complete your program of study at BSA in the U.S.A.
- ◆ If you are planning to open a salon, you should include this on your letter; who will be assisting you financially on opening your business, if applicable.

5. Letter indicating no legal issues pending in your Country or outside the U.S.A.:

- ◆ Documentation that proofs you have NO legal issues pending in your Country or outside the U.S.A.

Remember that the United States Embassy is the entity that reviews your entire case; they will be interviewing you and making a decision at the end. The stronger your case is in all of the above mentioned areas, the higher your possibilities of getting approved for your M-1 visa.

We look forward to having you as one of our proud students.

I have the above recommendations and understand that I am under no obligation to produce them, but they are highly suggested documents that will make my case stronger to obtain a visa so that I may attend BSA.

Student's Name (Print)

Student's Signature

Date (MM-DD-YYYY)