

PRIVATE SCHOOL

ACADEMY PROGRAM APPLICATION

2015-2016



Step 1: Application - All Documents Must be Submitted in English

Application consideration for all grade levels will be initiated when Steps 1 and 2 are completed:

- Application
- Copy of Passport or U.S. Birth Certificate or Resident Alien Card
- Character Reference Form: The applicant will need one (1) Character Reference Form completed by an adult (not a family member), who has known the applicant for a minimum of one year and who can speak about the applicant's character and integrity. If applying only to a sport program, and not to our academic program, three (3) character references will be required.

Education Forms (For Application to any Academic Programs at IMG Academy)

- Official School Transcript, including most recent grade report. Applicants to high school (grades 9-12) or the Post Graduate Program must submit all secondary school records, including 8th grade academic reports. Applicants from non-US schools must see next page for instructions.
- Transcript Evaluation Form (**Required of applicants from non-U.S. schools; additional fees will apply. See page 13**)
- Math and English Teacher Recommendation Forms (Grades 6-12 and Post Graduate Program)
- Teacher Screening Form (*Elementary School Applicants only*)
- Official TOEFL, TOEFL Jr., or IELTS score report (Required of any non-native English speaker applying to grades 9-12 or the Post Graduate Program)**
- Academic Release Form

Application Processing Fee:

- \$200 non-refundable fee: U.S. check or money order should be made payable to **IMG Academy**. If you wish to pay by credit card, see page 6.

Return Application in One of Three Ways:

- Email: Admissions@img.com
- Fax: (941) 752-2526
- Mail: IMG Academy Office of Admissions
5500 34th Street West
Bradenton, FL 34210

Step 2: Campus Visit

All applicants must contact the Student-Athlete Advisor from their respective sport academy in order to arrange a campus visit.

- We recommend that all prospective students visit the Academy. If necessary, a meeting will be arranged with the Office of Admissions. Ideally, this would take place during a one-week camp program at the Academy, which would offer the opportunity to acquaint yourself with our environment, meet our coaches and staff, participate in a sport program, review the student housing options and learn more about our Academic Programs.

Step 3: Application Deadlines

- Regular Decision Application Deadlines: December 12th, 2014 Feb 27th, 2015 April 3rd, 2015
 May 1st, 2015 July 3rd, 2015

All application materials must be received by deadline dates before receiving a decision notification. Notifications are sent on the 15th of each month.

Completed applications received after July 1 will be reviewed on a weekly basis, depending on space availability.

If you have attended an IMG Academy camp or taken an official IMG Academy visit with an Academy advisor, you are eligible to receive a conditional decision. If a conditional acceptance is issued, a notification letter will be issued upon receipt of a non-refundable \$6,000 deposit. A complete application is still required for an official decision. If, for whatever reason, a conditional acceptance is rescinded by IMG Academy, the deposit will be refunded in full.

Step 4: Decision/Tuition Enrollment Agreement/Deposit

Notification of decision will be sent on the 15th of each month. If offered admission to IMG Academy, a Tuition Enrollment Agreement (TEA) and Financial Worksheet will be sent and **must be returned by the date indicated, with the deposit as described below.**

- All Students:** Read and sign the TEA and return to IMG along with a non-refundable \$6,000 deposit to reserve your space at IMG Academy.
- Non-U.S. Citizens:** Students requiring a new Form I-20 must send an additional non-refundable \$500, along with the non-refundable \$6,000 deposit, **plus proof of finances** (see pg. 2) Students already in possession of a valid I-20 are not required to pay the additional \$500. Students in semi-intensive English or Post Grad college programs will not receive an I-20.

Registration and Health Forms - Forms will be sent after signed TEA, worksheet and deposit are received

Registration and Health Forms must be completed and returned five (5) weeks prior to arrival and participation in IMG Academy programs.

Please note the Physician's Report must be completed after June 1st.

If you have any questions please do not hesitate to contact the IMG Academy Office of Admissions.

- Telephone: (941) 752-2569
- Fax: (941) 752-2526
- E-mail: Admissions@img.com

THIS SECTION IS INTENDED FOR ANY APPLICANT WHO:

- is attending or has ever attended a non-U.S. sponsored high school or secondary school, or
- is seeking an I-20 for the purpose of obtaining an F-1 student visa, or
- currently holds an I-20 from another U.S. institution.

All other applicants, please continue to page 3.

Step 1: Academic Records (Applicants to Grades 9 - 12 or the Post Graduate Program):

IMG Academy must receive **ALL** transcripts from non-U.S. sponsored high schools or secondary schools (i.e. *Preparatoria, Ensino Médio, Gymnasium, Key Stage 4 and Sixth Form, etc.*). Applicants should also submit records for the year prior to Secondary School (i.e. *Secundaria, Ensino Fundamental, Basic Secondary, Middle Class, Key Stage 3*) and national examination scores, if applicable.

- All transcripts must be official documents and must show courses taken and grades earned.
- Applicants should also submit an official English translation of the transcript in addition to original.
- Applicants must complete the Transcript Evaluation Form (see page 13) and include a credit card number.

Step 2: Academic Records (Applicants to Grades 1 - 8):

All official school records must be submitted, along with an official English translation. The transcript evaluation process is not intended for students applying to Grades 1 – 8.

Step 3: Proof of Financial Resources:

All applicants who will require a Form I-20 from IMG Academy must demonstrate they have sufficient funds to cover the cost of annual tuition, fees, **AND** living expenses at IMG Academy. The acceptable forms of financial verification include an affidavit of support and one of the following:

- Bank Statements from past three months, showing regular deposit history
- Letter from Bank (see page 14)
- Letter from employer indicating salary

NOTE: Bank or employer letter must be in English or accompanied by an official English translation. The I-20 will be issued after IMG Academy receives these documents.

Step 4: Proof of English Proficiency & Academic Placement Assessment:**THIS SECTION IS FOR NON-NATIVE ENGLISH SPEAKERS**

Applicants to grades 9-12 or the Post Graduate High School Program **MUST** submit scores from the Test of English as a Foreign Language (TOEFL), TOEFL Jr., or International English Language Testing System (IELTS). For applicants to grade 12 and the Post Graduate High School Program, the minimum acceptable score for the Internet-based TOEFL is 69-70 and the paper-based TOEFL is 523. The minimum acceptable band score for IELTS is 6.

All other applicants for grades 6 – 8 are welcome to submit scores from the TOEFL Jr exam. Or, upon arrival to IMG Academy, these students will take an English proficiency exam as part of the academic assessment. Based on the results, students may be placed into the non-credit, English program.

Step 5: International Students Transferring from Other U.S. Institutions:

Upon official acceptance to IMG Academy, students must contact their current school to request a transfer of their SEVIS/I-20 record to “IMG Academy.” When the tuition deposit is paid to IMG Academy, and proof of financial verification is received, IMG Academy will issue an updated I-20.

APPLICATION: GENERAL INFORMATION

Please complete the entire application by printing or typing and return along with \$200 (nonrefundable) application processing fee.

Today's Date: _____ Sport Program(s): _____ Positions(s): _____

Full Year Semester 1 (Aug-Jan) Semester 2 (Jan-June) Boarding Non-Boarding

Grade Entering (Please circle): PK K 1st 2nd 3rd 4th 5th 6th 7th 8th 9th 10th 11th 12th Post Graduate

School: IMG Academy Academic Division

Sport Only: No Academics at IMG

Sport+English

Grades PK-12

Online

Semi-Intensive English

Post-Graduate (High School)

Homeschool

(Non-credit Program)**

Post-Graduate (College Credit)*

Other _____

**Post Graduate College courses are offered through USF and are for U.S. Citizens and Resident Alien Card Holders only.*

***Semi-Intensive English is a part-time program that does not require an I-20 (at this time).*

Are you currently attending an IMG Academy sport program and are **now transferring** to an IMG Academy Academic Program? Yes No

Have you previously attended the IMG Academic Program? Yes No If yes, when did you attend: _____

Have you previously attended an IMG Academy Sports Camp? Yes No If yes, when did you attend: _____

STUDENT-ATHLETE INFORMATION (PRINT FULL NAME AS IT APPEARS ON YOUR PASSPORT)

Last Name: _____ First Name: _____ Middle Name: _____

Preferred Name: _____ Gender: Male Female Birth Date: _____ Age: _____

(Month/Day/Year)

Permanent Home/Street Address: _____

City/Town/Locality: _____ State/Region: _____ Postal Code: _____ Country: _____

Home Phone: _____ Student-Athlete Cell Phone: _____

(Country Code)(City/Area Code)(Phone Number)

(Country Code)(City/Area Code)(Phone Number)

Student-Athlete Email Address: _____

Ethnic Background (optional): American Indian or Alaskan Native Asian, Asian-American or Pacific Islander Other
 Black, African or African-American - Not of Hispanic Origin Hispanic or Latin-American White - Not of Hispanic Origin

Country of Citizenship: _____ Birthplace: _____

(City,Country)

Do you have a valid Resident Alien Card? Yes No If so, provide copy.

Are you an international student currently studying in the U.S.? Yes No If yes, under what status? _____

Do you currently have an active I-20 from another school? Yes No

Native Language: _____ English Proficiency: Beginner Intermediate Advanced

Did you work with an IMG Academy Representative? Yes No If yes, who? _____

Friends/Family Members who have attended IMG Academy. Please list name(s) and Year(s) attended:

Name: _____ Friend Family Year: _____

EDUCATION (SCHOOL CURRENTLY ATTENDING)

School Name: _____ Street Address: _____

City/Town/Locality: _____ State/Region: _____ Postal Code: _____ Country: _____

School Phone : _____ Teacher/Counselor: _____

(Country Code) (City/Area Code) (Phone Number)

Independent Private Public Online Home School

Dates of Attendance: _____

Last Grade Level Completed: _____ Have you completed your IGCSEs or GCEs? Yes No

Have you graduated from high school? _____ if yes, when? _____

If not, when is your expected date of graduation in your country? _____

FAMILY INFORMATION

With whom does the applicant live? Mother Father Both Parents Other: _____
 Are the applicant's parents/guardians divorced or separated? Yes No
 If yes, what date and who is the custodial parent of the student? Custody agreement must be provided. _____
 Who should receive financial statements? Mother Father Both Parents Other: _____

Primary Parent/Guardian:

Relationship to applicant: _____
 Mr. Mrs. Ms. Dr.
 Name: _____
 Living Deceased
 Home/Street Address: _____
 City/Town/Locality: _____
 State/Region: _____
 Postal Code: _____ Country: _____
 Home Phone: (_____) _____
 Cell Phone: (_____) _____
 Email Address: _____
 Place of Employment: _____
 Position / Occupation: _____
 Business Phone: (_____) _____

Secondary Parent/Guardian:

Relationship to applicant: _____
 Mr. Mrs. Ms. Dr.
 Name: _____
 Living Deceased
 Home/Street Address: _____
 City/Town/Locality: _____
 State/Region: _____
 Postal Code: _____ Country: _____
 Home Phone: (_____) _____
 Cell Phone: (_____) _____
 Email Address: _____
 Place of Employment: _____
 Position / Occupation: _____
 Business Phone: (_____) _____

Additional Parent/Guardian/Family Representative:

Relationship to applicant: _____
 Mr. Mrs. Ms. Dr.
 Name: _____
 Home Phone: (_____) _____
 Cell Phone: (_____) _____
 Email Address: _____

Additional Parent/Guardian/Family Representative:

Relationship to applicant: _____
 Mr. Mrs. Ms. Dr.
 Name: _____
 Home Phone: (_____) _____
 Cell Phone: (_____) _____
 Email Address: _____

Siblings (Please give names and ages): _____

INDIVIDUALIZED NEEDS (QUESTIONS MUST BE ANSWERED BY ALL APPLICANTS)

IMG offers a variety of support services to its students. It is necessary to provide answers to the following questions in order to determine your child's individual needs and if they can be met by our staff.

1. Has the applicant been evaluated by a psychologist or neuro-psychologist within the past five years?* Yes No
*The results of ANY type of neuro-psychological or educational evaluation must be provided in order to review the application.
2. Does the applicant have an identified learning difference? Yes No
 If yes, what is the identified learning difference? _____
3. Has the applicant ever had an IEP or 504 plan? Yes No (If yes, a copy must be provided, regardless of date.)
4. Has applicant ever been provided accommodations in the classroom or on standardized testing (i.e. extra time, etc.)?
 Yes No (If yes, please provide details and/or documentation)
5. Does the applicant have a chronic medical condition such as diabetes, seizure disorder, severe allergies or mental health disorder?
 Yes No If yes, please explain: _____
6. Does the applicant take any medication on a regular basis? Yes No If yes, please list: _____

APPLICATION: SHORT ANSWER QUESTIONS

To assist the Admissions Committee in becoming better acquainted with you, your thoughts, ideas and goals, please answer the short answer questions below. All answers should be provided in English, and should be written by the applicant.

1. If you could have one super power, what would it be, and why? _____

2. Tell us about the school subject you enjoy studying the most. _____

3. Tell us something interesting or unique about you that is NOT sports-related. _____

4. Out of all the four-year colleges in the U.S., which one do you want to attend, and why? _____

5. If you could work in any profession (not sports-related), what would it be? _____

6. Please describe a daily routine or tradition of yours that may seem unusual to others, but holds special meaning for you.

7. Tell us about the most embarrassing moment of your life. _____

8. If you are applying to our boarding program, is this your first experience living away from home: Yes No

If no, please explain: _____

9. Have you ever been expelled, dismissed, suspended or placed on probation, or otherwise subjected to any disciplinary sanction by any school or athletic organization? Yes No If yes, please provide the details: _____

STUDENT/PARENT AGREEMENT

I understand that this application for admission will not be considered complete until my official school transcript, letters of recommendation, character reference form, \$200 application fee and IEP/Educational Evaluation (if applicable) and official test scores (if applicable) have been received by IMG Academy.

I acknowledge that the information presented on this application is complete, correct and truthful, and I am willing to abide by the rules and regulations set forth by IMG Academy. If anything is found to be untrue, IMG Academy reserves the right to revoke any offer of admission and, subsequently, remove the student from the Academy without refund.

Applicants of IMG Academy will be considered without regard to race, color, creed, sex, gender, sexual preference or orientation, disability, or national origin.

Applicant Name: _____

Signature of Applicant: _____ Date: _____

Parent or Guardian Name: _____

Signature of Parent/Guardian: _____ Date: _____

The \$200 nonrefundable application fee must be paid by check, money order or credit card. Please make checks payable to IMG Academy. Check (U.S. Checks Only) Money Order

**If you would like to pay the \$200 nonrefundable application fee by credit card, please call (941)752-2569 to provide your credit card information over the phone.

APPLICATION: CHARACTER REFERENCE FORM

(ALL APPLICANTS)

Applicant's Name: _____ Sport: _____

To the Applicant:

Please submit this form to an adult (non-relative) who has known you for at least one year in a non-academic area of your life (i.e. sport coach, extracurricular activities, job, church, family friend, etc.). This should be a person who can speak about your character, integrity and work ethic. **If you have attended a boarding school in the last three (3) years, this reference must be from a residential life representative.**

To the Recommender:

The above named applicant is applying for enrollment to IMG Academy. Our program combines a rigorous academic curriculum with a competitive and demanding sports training program. Our student body comprises individuals from across the USA and 60 countries. The program should be undertaken only by students/athletes of unquestioned motivation. Individual character, integrity and initiative are important to success in our community since demands on the individual are high.

We thank you in advance for the help your judgments will provide. Your knowledge of the applicant and willingness to give us an honest appraisal will prove invaluable in our decision-making process. We assure you that all aspects of your recommendation will be kept confidential.

Please return this form in a sealed envelope to the applicant or send directly to the Office of Admissions (see bottom of form). Thank you for taking the time to complete this character reference form.

Today's Date: _____

Name: _____ Position: _____

Email Address: _____ Work Phone: () _____

1. How long have you known this applicant? _____
2. What is your relationship with him/her? _____
3. What are the first three words that come to mind in describing the applicant?
1. _____ 2. _____ 3. _____
4. How would you rate the applicant in the following areas compared with others of the same age?

	Truly Outstanding	Excellent	Good	Average	Below Average
a) Integrity					
b) Consideration					
c) Responsibility					
d) Cooperation					
e) Motivation/Effort					
f) Dedication					
g) Coachability					

5. Please describe the applicant's overall attitude, cooperation and involvement with peers and elders. _____

6. Are you aware of any family circumstances that affect the student's life at school, sport, etc.? Please explain: _____

7. Which word(s) best describe the parents in regard to their child? _____

8. Please share with us any additional qualities, strengths, weaknesses or experiences you think we should be aware of as we evaluate the applicant's candidacy for IMG Academy. _____

Signature: _____

PLEASE SEND TO:

IMG Academy Office of Admissions, 5500 34th Street West, Bradenton, FL 34210
Phone: (941) 752-2569 Fax: (941) 752-2526 Email: Admissions@img.com

APPLICATION: MATHEMATICS RECOMMENDATION FORM

(GRADES 6-12 & POST GRADUATE PROGRAM)

Applicant's Name: _____ Sport: _____

To the Applicant:

Please submit this form to your mathematics teacher.

To the Recommender:

The above named applicant is applying for enrollment to the IMG Academy. Our program combines a rigorous academic curriculum with a competitive and demanding sports program. Our student body comprises players from across the USA and 60 countries. The program should be undertaken only by students/athletes of unquestioned ability and motivation. Individual character, integrity and initiative are equally important to success in our community.

We thank you in advance for the help your judgments will provide. Your knowledge of the applicant and willingness to give us an honest appraisal will prove invaluable in our decision-making process. We assure you that all aspects of your recommendation will be kept confidential.

Please return in a sealed envelope to the applicant or send directly to the Office of Admissions (see bottom of form). Thank you for taking the time to complete this recommendation.

Today's Date: _____
 Name: _____ Position: _____
 Email Address: _____ Work Phone: () _____

1. How long have you known this applicant? _____
2. How would you rate the applicant in the following areas compared with others of the same age:

	Excellent	Good	Average	Poor	No Basis
a) Performance in Mathematics					
b) Completes assignments on time					
c) Classroom conduct					
d) Participates in Mathematics class					
e) Mathematics potential					
f) Ability to work independently					
g) Score on Mathematics tests and quizzes					
h) Critical and abstract thinking					
i) Overall evaluation in Mathematics					

3. PLACEMENT RECOMMENDATIONS

High School:

- Algebra I
 Geometry
 Algebra II
 Algebra III/Trig
 Pre-Calculus
 Calculus

Middle School:

- Math 6
 Math 7
 Pre-Algebra
 Algebra I

4. Is this student currently taking a college preparatory curriculum? Yes No

5. Is this student currently taking an IB curriculum? Yes No

6. Additional Comments:

7. I recommend this student for admission to IMG Academy: Yes No

8. I would like a telephone conference: Yes No

Signature: _____

PLEASE SEND TO:

IMG Academy Office of Admissions, 5500 34th Street West, Bradenton, FL 34210

Phone: (941) 752-2569 Fax: (941) 752-2526 Email: Admissions@img.com

APPLICATION: ENGLISH RECOMMENDATION FORM

(GRADES 6-12 & POST GRADUATE PROGRAM)

Applicant's Name: _____ Sport: _____

To the Applicant:

Please submit this form to your English teacher.

To the Recommender:

The above named applicant is applying for enrollment to the IMG Academy. Our program combines a rigorous academic curriculum with a competitive and demanding sports program. Our student body comprises players from across the USA and 60 countries. The program should be undertaken only by students/athletes of unquestioned ability and motivation. Individual character, integrity and initiative are equally important to success in our community.

We thank you in advance for the help your judgments will provide. Your knowledge of the applicant and willingness to give us an honest appraisal will prove invaluable in our decision-making process. We assure you that all aspects of your recommendation will be kept confidential.

Please return in a sealed envelope to the applicant or send directly to the Office of Admissions (see bottom of form). Thank you for taking the time to complete this recommendation.

Today's Date: _____
 Name: _____ Position: _____
 Email Address: _____ Work Phone: () _____

1. How long have you known this applicant? _____
2. How would you rate the applicant in the following areas compared with others of the same age:

	Excellent	Good	Average	Poor	No Basis
a) Performance in English					
b) Completes assignments on time					
c) Classroom conduct					
d) Participates in English class					
e) Study habits/English skills					
f) Reading & comprehension ability					
g) Writing ability					
h) Ability to work independently					
i) Scores on English tests and quizzes					
j) Critical and abstract thinking					
k) Overall evaluation in English					

3. PLACEMENT RECOMMENDATIONS

- English as a Second Language
 Regular English
 Honors English
 AP English (Juniors & Seniors Only)

4. Is this student currently taking a college preparatory curriculum? Yes No

5. Is this student currently taking an IB curriculum? Yes No

6. Additional Comments:

7. I recommend this student for admission to IMG Academy: Yes No

8. I would like a telephone conference: Yes No

Signature: _____

PLEASE SEND TO:

IMG Academy Office of Admissions, 5500 34th Street West, Bradenton, FL 34210

APPLICATION: TEACHER SCREENING FORM

(ELEMENTARY SCHOOL STUDENTS ONLY GRADES K-5)

This form is for applicants to Pre-K through Grades 1-5, this must be completed by current teacher. For Pre-K this may be completed by parents. All applicants to grades 1-5 must also provide academic grade reports in English.

Today's Date: _____

Student's Name: _____ Age: _____

Last School Attended: _____

Address: _____

Number of Years Enrolled: _____ Most Recent Grade Completed: _____

Teacher's Name: _____ Email Address: _____

Directions: Please complete the questions below by checking the appropriate level and average, or by providing a brief narrative. If a particular rating area is not appropriate for this student, please check "N/A." Your professional assessment will help us to determine whether our school can meet the needs of this applicant.

If this child is enrolled in Pre-K or Kindergarten, please complete ONLY the Development Status Section of this form.

A: ACHIEVEMENT PROFILE

Reading: This student's reading skills are considered to be:

- Above Grade Level
- At Grade Level
- Below Grade Level
- N/A

Comments: _____

Mathematics: This student's math skills are considered to be:

- Above Grade Level
- At Grade Level
- Below Grade Level
- N/A

Comments: _____

Written Expression, Including Spelling: This student's written expression and/or skills are considered to be:

- Above Grade Level
- At Grade Level
- Below Grade Level
- N/A

Comments: _____

Your overall rating of achievement of this student compared with age and grade mates:

- Above Grade Level
- At Grade Level
- Below Grade Level

Comments: _____

PLEASE SEND TO:

IMG Academy Office of Admissions, 5500 34th Street West, Bradenton, FL 34210

APPLICATION: TEACHER SCREENING FORM

(ELEMENTARY SCHOOL STUDENTS ONLY GRADES K-5)

B: BEHAVIORAL ADJUSTMENT:

Compared to other similarly aged youngsters, please rate the following:

AREA	Above Average	Average	Below Average
Motivation			
Peer Instruction			
Relationship with Authority			
Self Control/Impulse Control			

C: DEVELOPMENT STATUS: (For currently enrolled Pre-K and Kindergarten Children)

1. Fine Motor Skills:

- Above Grade Level
- At Grade Level
- Below Grade Level

Comments: _____

2. Gross Motor Skills:

- Above Grade Level
- At Grade Level
- Below Grade Level

Comments: _____

3. Language (Both Expressive and Receptive):

- Above Grade Level
- At Grade Level
- Below Grade Level

Comments: _____

4. Play Behavior:

- Above Grade Level
- At Grade Level
- Below Grade Level

Comments: _____

5. Temperament Patterns (Adaptable, Slow to Warm-up, Reactive, etc):

- Above Grade Level
- At Grade Level
- Below Grade Level

Comments: _____

6. Describe English Proficiency: _____

PLEASE SEND TO:

IMG Academy Office of Admissions, 5500 34th Street West, Bradenton, FL 34210
Phone: (941) 752-2569 Fax: (941) 752-2526 Email: Admissions@img.com

APPLICATION: ACADEMIC RELEASE FORM

FOR APPLICATION TO OUR COLLEGE PREPARATORY PROGRAM OR POST GRADUATE PROGRAM

To the Parents:

Please provide your child's full name and submit this form to his/her current school's Headmaster, Principal, Guidance Counselor or person responsible for forwarding copies of school records.

A copy of this form must be returned to the IMG Academy Admissions Office.

TO THE PRINCIPAL/HEADMASTER/GUIDANCE COUNSELOR/TEACHER:

I authorize and request that you send copies of the following information directly to IMG Academy:

- Official transcript of grades
- Grades for the most recent quarters
- Standardized test records
- Results of any individual testing
- References from an English and a Math teacher
- Copies of neuro-physical or educational evaluations, if applicable
- Description of any Special Services administered to this student

Name of Student: _____

Parent or Guardian's Name: _____

Signature of Parent or Guardian: _____ Date: _____

Please return this form and requested documents to:

IMG Academy
Office of Admissions
5500 34th Street West, Bradenton, FL 34210
Fax: (941) 752-2526 Email: Admissions@img.com

PRIVATE SCHOOL

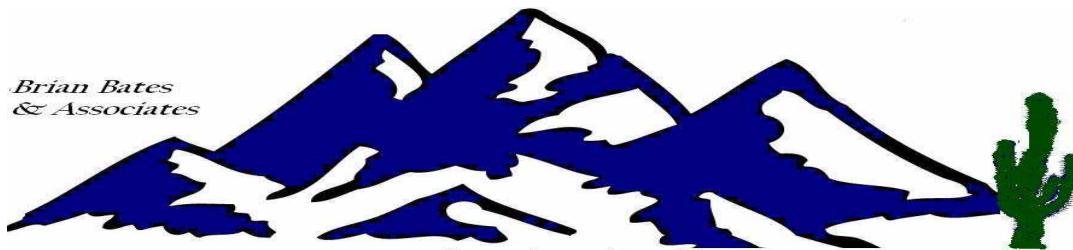
INTERNATIONAL STUDENT INFORMATION

2015-2016

(ADDITIONAL APPLICATION INFORMATION)



Brian Bates
& Associates



Arizona International Credential Evaluators LLC
www.iceinaz.com

Application for Evaluation

Please PRINT or TYPE

Provide all information as requested. **Your signature must appear on this form before an evaluation report will be prepared.**

Last Name/Family Name _____ First/Given Name _____

Mailing Address _____

Day Telephone Number _____ Fax Number _____

E-mail Address: _____ Date of Birth _____ Gender _____ M _____ F

Country of Birth _____ Country of Citizenship _____

REASON of EVALUATION (Check appropriate boxes)

- Education
- Employment
- Cosmetology
- Other _____
- Teacher Certification (state) _____
- Immigration

FEES (Check the appropriate boxes)

- Document-by-Document (\$75.00) Course-
- by-Course (\$175.00)
- Additional Copies (\$10.00 each)
- Overnight Express Mail (\$25.00 - U.S. Only)
- International Express (\$50.00)
- Priority Mail (\$8.00) - U.S. Only
- Return Documents (\$15.00)

- 3 business day RUSH (\$100.00 additional)
- 1 business day RUSH (\$175.00 additional)
- Translation to conduct the evaluation (\$100.00)

METHOD OF PAYMENT _____ Cashiers Check or Money Order _____ Credit Card (Please complete the information requested below.)
_____ Visa _____ MasterCard _____ American Express

Credit Card Number

Expiration Date _____ Month _____ Year _____ CVC*

*This can be found on the back of Visa & Master Card on the signature strip and is 3 numbers long. For American Express Card it is on the front of the card above CC# and it is 4 numbers long.

Cardholder Name (printed) _____ Amount to be charged \$ _____

Cardholder Address (printed) _____

Cardholder Signature _____ Date of Signature _____

RETURN APPLICATION BY MAIL OR FAX TO:
AZICE 5830 W Thunderbird Rd Ste B8 #101 Glendale, AZ 85306 Fax 623-687-9501

All faxed applications must include credit card information.

Brian Bates
& Associates



Arizona International Credential Evaluators LLC
www.iceinaz.com

EDUCATIONAL HISTORY

List all educational institutions attended, beginning with primary school and ending with the last year of education (including any school in which you are currently enrolled). Add additional sheets if needed. **Write the name of each certificate or diploma in English and in the native language. Native language records must be accompanied by English translations for the documents you want evaluated.**

Name(s) of Institution(s)	Country	Dates of Attendance	Diploma/Certificate	Year of Graduation

If you would like a copy of the report sent to a third party, please indicate name(s) and address(es) below. (See fees for extra copies, previous page)

How did you learn of our service? _____

CERTIFICATION OF THE APPLICANT

I certify that, to the best of my knowledge, all of the information provided in this application is complete and correct.
I certify that I have submitted all required documents, including **native language records with English translations.**
I authorize AZICE to verify all submitted educational credentials in order to conduct a thorough and professional credential evaluation.
I understand that evaluation reports prepared by AZICE . are **ADVISORY**, and are **NOT** binding on any agency, institution or organization that uses them.
I understand there will be no refund except as outlined in this application.
I release AZICE from any liability for damages incurred by me, by my representative, or by any third party, resulting from the use of an evaluation report by me or any third party.

Signature _____ Date of Signature _____

**RETURN APPLICATION BY MAIL OR FAX TO:
AZICE 5830 W Thunderbird Rd Ste B8 #101 Glendale AZ 85306 FAX:6236879501**

All faxed applications must include credit card information.

APPLICATION: SAMPLE BANK LETTER

(INTERNATIONAL STUDENTS)

APPLICANTS WHO NEED THE FORM I-20 SHOULD HAVE THEIR FINANCIAL INSTITUTION WRITE AN OFFICIAL LETTER USING THE TEMPLATE BELOW AND HAVE IT SENT TO:

IMG Academy
Office of Admissions
5500 34th Street West, Bradenton, FL 34210
Fax: (941) 752-2526 Email: Admissions@img.com

Subject line should read: BANK LETTER (name of student)

THIS LETTER MUST BE PLACED ONTO BANK LETTERHEAD

IMG Academy
Office of Admissions 5500
34th Street West
Bradenton, FL 34210 USA

Date

Dear Sirs:

We certify that Mr/Mrs (Your Name) have an account with (Bank Name).

Mr/Mrs (Your Name), who is one of our valued clients, is ready, willing, and able to cover the cost of all tuition, fees, housing costs, and miscellaneous expenses of (Student's Name) during enrollment at IMG Academy.

The cost of the program is: \$(Program Cost)

This certificate is issued at the request of our client without any obligation and responsibility on our part.

Sincerely,

(Bank representative's name and signature)

(Bank seal must be affixed to the letter.)

INTERNATIONAL STUDENT QUESTIONNAIRE FOR I-20 FORM (INTERNATIONAL STUDENTS)

P15

STUDENT-ATHLETE INFORMATION

Please **PRINT** or **TYPE**

Family Name (as it appears on passport): _____

First Name (as it appears on passport): _____

Middle Name (as it appears on passport): _____

Gender: Male Female

Country of Birth: _____

City/Region of Birth: _____

Country of Citizenship: _____

Date of Birth (month/day/year): _____

FOREIGN ADDRESS

Your physical permanent address in your home country (required)

Street Address: _____

City/Town/Locality: _____

State/Region: _____

Postal Code: _____

Country: _____

Phone Number: _____

Email Address (for UPS confirmation): _____

PHYSICAL MAILING ADDRESS

Address you would like us to use when mailing your I-20 Form (required)

Check here if same as above

Street Address: _____

City/Town/Locality: _____

State/Region: _____

Postal Code: _____

Country: _____

Phone Number: _____

Email Address (for UPS confirmation): _____