



International Student Application Form

South Beach Languages: 930 Washington Ave. 4th Floor, Miami Beach, FL 33139
 SBL North: 1915 Hollywood Blvd, Hollywood, FL 33020

info@southbeachlanguages.com
www.southbeachlanguages.com

Student Information (All information below must be exactly the same as it appears on your passport. Please print clearly.)

Family Name _____

First Name _____ Middle Name _____

Date of Birth (MM/DD/YYYY) ___/___/_____ Gender: Male Female

Phone # _____

Email _____

Country of birth _____ Country of citizenship _____ Native Language _____

Permanent Address in your country: _____

Local USA Address (if known): _____

Emergency Contact Name

Emergency Phone #

Relationship

Enrollment Information

Studying English should be linked to an academic, professional or personal objective. Please describe why you want to improve your English (be very specific): _____	Highest level of education completed: _____	On a scale of 1 (Beginner) to 10 (Advanced), how would you rate your English? _____
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I am applying for: <input type="checkbox"/> Initial F1 Visa <input type="checkbox"/> Transfer F1 Visa <input type="checkbox"/> Change of Visa Status <input type="checkbox"/> Re-Entry Are you applying with any dependents (F2): <input type="checkbox"/> Yes <input type="checkbox"/> No How many? _____ <i>If yes, contact us. F2 register fee may apply.</i>	I have included a recent bank letter: <input type="checkbox"/> From my own account <input type="checkbox"/> From my parent's or sponsor's account	How many weeks do you plan to study? _____ weeks What date do you wish to begin classes? (Classes begin every Monday. The i20 form must specify a start date) ___/___/_____ MM DD YYYY	How did you hear about our school? <input type="checkbox"/> Internet <input type="checkbox"/> Friend <input type="checkbox"/> Walk in <input type="checkbox"/> Other: _____
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Payment Information

Students can pay by credit card or via PayPal on our website. Check off your program below. You can pay monthly or in advance for a discount. **Special: Pre-pay 5 months, get 1 month free. Pre-pay 9 months, get 3 months free!** (1 month=4 weeks)

Enter your number of months & tuition in the TUITION CALCULATOR. Registration fee=\$150. Express mail fee=\$100 (if we are mailing your I-20).

School Session	Miami Beach Morning <input type="checkbox"/>	Miami Beach Afternoon <input type="checkbox"/>	Miami Beach Evening <input type="checkbox"/>	Hollywood Morning <input type="checkbox"/>	Hollywood Evening <input type="checkbox"/>
Time (m/t/w/th)	9am-1:30pm	2-6:30pm	4:30-9pm	9am-1:30pm	5:30-10pm
Monthly Price	\$699	\$549	\$499	\$549	\$399

TUITION CALCULATOR
Months _____
<-Multiply by monthly price
= Tuition: _____
+ Registration: \$150
+ Mail Fee: \$100
Total _____

Name as it appears on card _____

Credit Card Account # _____

Expiration Date (MM/YY) ___/___ Security Code (last digits on back of credit card) _____ (If card name differs, provide ID)

I _____ hereby authorize South Beach Languages to charge my credit/debit card for the total amount indicated above.	Cardholder's Signature _____	Date (MM/DD/YYYY) _____
	_____	_____

Applicant's Pledge

I have read and understood the estimated costs of attending South Beach Languages (SBL). I have enough money available to pay for all expenses, including tuition, registration fee, health insurance, meals, housing and personal expenses. I understand F1 students must attend minimum 18 hours per week and follow US F1 visa regulations. I understand and agree to the refund policy. I certify that all statements on this form are true.

Full Name _____	Signature _____	Date (MM/DD/YYYY) _____
_____	_____	_____