## International Student Application Form South Beach Languages: 930 Washington Ave. 4<sup>th</sup> Floor, Miami Beach, FL 33139 SBL North: 1915 Hollywood Blvd, Hollywood, FL 33020 www.

info@southbeachlanguages.com www.southbeachlanguages.com

| Student Information  | (All information be           | low must be exactly           | the same  | as it a <sub>l</sub>                           | ppears on your p  | passport. Please p     | rint cled                               | arly.)   |
|--|-------------------------------|-------------------------------|---|--|-------------------|------------------------|---|--|
| Family Name  |                               |                               |   |  |                   |                        |   |  |
| First Name Middle Name   |                               |                               |   |  |                   | Emergency Contact Name |   |  |
| Date of Birth (MM/DD/YYYY)/ Gender: Male  Female   |                               |                               |   |  |                   |                        |   |  |
| Phone #  |                               |                               |   |  | Emergency Phone # |                        |   |  |
| Email  |                               |                               |   |  |                   | Relationship           |   |  |
| Country of birth Country of citizenship  |                               |                               |   |  | L                 | Native Language        |   |  |
| Permanent Address in y   | our country:                  |                               |   |  |                   |                        |   |  |
| Local USA Address (if kn   |                               |                               |   |  |                   |                        |   |  |
| 1  |                               | acadomic professi             | onal or no  | rconal   | ohioctivo         | Highest level of       |   | On a scale of 1 (Beginner)                                 |
| Studying English should be linked to an academic, professional Please describe why you want to improve your English (be ver  |                               |                               |   |  | -                 | education completed:   |   | to 10 (Advanced), how<br>would you rate your               |
|  |                               |                               |   |  |                   |                        |   | English?   |
| I am applying for:   |                               |                               |   |  |                   |                        |   | How did you hear about                                     |
| ☐ Initial F1 Visa☐ Transfer F1 Visa  | recent bank le<br>☐ From my o |                               | What date will you begin the classes (Classes start on Mondays) |  |                   | •                      | our school?                             |  |
| Change of Visa Sta   | account                       | account                       |   | (Classes start on Monadys)                     |                   |                        | Friend                                  |  |
| Re-Entry   | or spansor                    | From my parent's or sponsor's |   | MM DD YYYY What date will you end the classes? |                   |                        | ☐ Walk in☐ Other:                       |  |
| Are you applying with any dependents (F2):  ☐ Yes ☐ No ☐ How many? accoun  |                               |                               |   | (Classes end on Thu                            |                   |                        |   |  |
| If yes, contact us. F2 register fee may apply.   |                               |                               |   |  |                   |                        |   |  |
|  |                               |                               |   | MM DD YYYY                                     |                   |                        |   |  |
| Payment Information  |                               |                               |   |  |                   |                        |   |  |
|  |                               |                               |   |  |                   |                        |   | or in advance for a discount. ar includes 44 study weeks). |
|  | -                             |                               | -   |  |                   |                        |   | (if we are mailing your I-20).                             |
|  | Miami Beach Miami Beach       |                               | Miami Beach H   |  | Hollywood         | Hollywood              |   | TUITION CALCULATOR   |
| School Session   |                               |                               | Evening   |  | ,<br>Morning □    |                        | 44 10 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 |  |
| Time (m/t/w/th)  | 9am-1:30pm                    | 2-6:30pm                      | 4:30-9  | pm   |                   |                        | = Tuition:                              |  |
| <b>Monthly Price</b>   | \$499                         | \$499                         | \$499   | 9  | \$499             | \$449                  |   | + Registration: \$150                                      |
| Name as it appears on card + Mail Fee: \$100   |                               |                               |   |  |                   |                        |   |  |
| Credit Card Account  | :#                            |                               |   |  |                   |                        |   |  |
| Expiration Date (MM  | 1/YY)/                        | Security Code (Id             | ıst digits on   | back o   | f credit card)    | (If                    | card na                                 | me differs, provide ID)                                    |
| ,  |                               |                               |   | Cardholder's Signature                         |                   |                        | Date (MM/DD/YYYY)                       |  |
| I, hereby authorize South Beach Languages to charge my   |                               |                               |   |  |                   |                        |   |  |
| credit/debit card for the total amount indicated above.  |                               |                               |   |  |                   |                        |   |  |
| 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)  |
|  |                               |                               |   |  |                   |                        |   |  |