To ensure the application is legible, please download and complete it using Adobe Acrobat Reader.



Student Information



2024-2025 APPLICATION For International Students

Student Name:			
Last	First	Middle	
/)		Desired Start Date:	
Grade (2024-2025):	August 19, 2024 (Fall Semester)		Semester)
Nickname or Preferred Name:		January 13, 2025 (Spring Semester) 2025-2026 commitment required if starting mid-year	
Student Home Address:			
Street	City	State	Zip
Student Home Phone:	D	ate of Birth:	Male
	d at school:	mo / day / year	Female
Persons authorized to pick up your chil			
Persons authorized to pick up your chile Family Information (please print clea			
	rly)	Parent's Name:	
Family Information (please print clea	rly)		
Family Information (please print clea Parent's Name:	riy)	Relationship to Child:	
Family Information (please print clea Parent's Name: Relationship to Child:	<u>rly)</u>	Relationship to Child: Home Address:	
Family Information (please print clea Parent's Name: Relationship to Child: Home Address:	rly)	Relationship to Child: Home Address:	
Family Information (please print clea Parent's Name: Relationship to Child: Home Address: Home Phone:	rly)	<pre> Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone:</pre>	
Family Information (please print clea Parent's Name: Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone:	rly)	<pre> Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone: Email Address:</pre>	
Family Information (please print clea Parent's Name: Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone: Email Address:	rly)	Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone: Email Address: Occupation:	
Parent's Name: Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone: Email Address: Occupation:	rly)	Relationship to Child: Home Address: Home Phone: Pager and/or Cellular Phone: Email Address: Occupation: Job Title:	

Medical Information - International students will be required to provide proof of medical insurance on arrival.			
Name of Child's Physician:	Phone Number:		
Please list any medicines or food to which your child is allergic:			
Please list any known medical conditions, anticipated special accommodations, current or anticipated medication and whether on- campus storage may be required for any such medications.			

In Case of Emergency

Please inform these people that you have listed them. They should be willing to pick up your child or assist if we cannot reach you in the event of an emergency. Only one is required now. Additional contacts may be provided during Orientation.

1.	NAME:

PHONE:

NEW STUDENTS -- Previous School History

Name of School:	Dates Attended:
School Phone Number:	Grade Completed:
School Address:	

Please let us know how the applicant is currently doing in each of the following subjects. (LOTE = Language Other Than English)				
Subject	Subject Level	Current Teacher Name	Current GPA	Comment if not A/B
Math				
Science				
English				
LOTE				

Extracurricular activities, regular clubs, or hobbies	From Date	To Date	
Additional Interests: What else does the applicant enjoy doing outside of school?			

I am the parent or legal guardian of the student on this application. I understand that, if the applicant is accepted, I and the student are bound by the terms of the enrollment contract to be signed when making our first payment, and that we are working toward the goal of this student being admitted to a well-recognized **four-year college/university**, not a two-year community college.* I agree to all prepayment and fee policies as stated on the Cambrian Academy website.

Signatures:

Parent

Date

Parent

Date

Why did you choose Cambrian Academy? Please elaborate on why the applicant is a good fit and will thrive in our program.

When submitting this completed application, please include the following:

INTERN	ATIONAL STUDENTS	Mail To:
1.	This application, fully completed and signed by parents.	
2.	I-20 Info Request Form	Cambrian Academy
	(Please complete fully. Some information will be the same as already	4340 Almadén Expressway
	provided on the application, but the I-20 Info Request Form is processed separately.)	San Jose, CA 95118-2009 USA
3.	Most recent school transcripts or report cards	If you wish to send a scanned application:
	Past two years preferred / Translations helpful, but not necessary	Scan all documents and email them to
4.	Passport - A scan of your valid passport or government issued ID.	admissions@cambrianacademy.org.
5.	Financial Statement - verifying more than one year of tuition and	
	living expenses.	We will then review the application and provide
6.	\$175.00 Application Fee (non-refundable)	further instructions.
	To pay the application fee by credit card:	
	https://cambrianacademy.org/appfee.html	

How were you referred to our school? (name of source if possible)

Please visit www.CambrianAcademy.org for more information about the registration timeline and fees. Cambrian Academy is fully accredited by the Western Association of Schools and Colleges.



Offers of admission will typically have an expiration date, after which the space may be offered to another applicant. This is in part because space availability is so limited. The sooner we fill the allotted spaces with committed students, the sooner we may begin detailed planning for the upcoming year. We work hard to provide the best customized program possible for each student.

*We do not require students to attend any particular college after graduation. However, we expect students to make their final decisions **after** receiving the best college admission and scholarship offers possible.

FOR OFFICE USE:

Date received:





I-20(SEVIS) Application

To avoid delay, please include all information. The \$650.00 fee includes processing, DHL, and SEVIS fees. (SEVIS fee is NON-REFUNEDABLE)

Student Personal Info (please complete online, then	print)
Your E-mail Address:	
Family Name:	First Name:
Gender: (F, M) Date of Birth:	month/day/year
Country of Birth:	City of Birth:
Country of Citizenship:	Passport Number:
CURRENT FOREIGN MAILING ADDRESS (This is w	where the student lives.)
Foreign Address:	
Foreign Address 2:	
City: Prov	ince/Territory:
Country:	Postal Code:
ADDRESS TO SEND I-20 AND ACCEPTANCE PACKET	(Local address okay if this is a transfer)
Foreign Address:	
Foreign Address 2:	
City: Prov	ince/Territory:
Country:	Postal Code:
Phone Number (This is required by DHL): _	

Answer these questions so we can help you prepare for your F1 interview.

Why do you wish to study in the United States?

Do you plan to continue your studies at a four-year college after graduating from Cambrian Academy?

Are there other persons traveling with you?

Have you ever been in the U.S.?

Have you ever been issued a U.S. visa?

Have you ever been refused a U.S. Visa, or been refused admission to the United States, or withdrawn your application for admission at the port of entry?

If "YES" please explain.

Has anyone ever filed an immigrant petition on your behalf with the United States Citizenship and Immigration Services?

If "YES" please explain, including dates.

What evidence will you provide to the US Consulate to demonstrate that you intend to return to your home country when you have completed your education in the United States?

If you already know the address where you will live in the United States, please provide it.

US Address: _		
City:	State:	_ ZIP Code:
Do you ha	ve any blood relatives currently residing in the Unit	ted States? \Box YES \Box NO

If yes, please list name, relationship and current city and state of residence.

Please note: When we process your I-20, we also pay your I-901 fee and print the receipt. You will receive a scan (by email) of your entire enrollment acceptance packet. Use the information to go online and set your Consular interview appointment. Please keep all documentation showing that you made an appointment and attended an interview. You will still need to pay your DS-160 fee each time you schedule an appointment.

If you have any questions please give us a call at (408) 833-7050. international@CambrianAcademy.org	AT SEE Y
TOTAL DUE WHEN SUBMITTING APPLICATION:	YES
US \$175.00 Non-Refundable Application Fee	
[Use this link to <u>PAY NOW</u>]	WIRE TRANSFERS:
WHEN WE HAVE REVIEWED THE APPLICATION, YOU WILL RECEIVE AN ENROLLEMNT CONTRACT AND AN INVOICE FOR: US \$650.00 SEVIS Fee, non-refundable US \$3,000.00 Prepaid Tuition, non-refundable* Check or money order made out to:	The application fee is paid online using the link provided here and on our first email to you. All other fees are paid by cash, check, or wire transfer.
Cambrian Academy 4340 Almadén Expressway, San Jose, CA 95118	When we accept a student, we send an invoice with the bank information for wire transfers.

* We may refund up to \$3,000 if the visa is denied after a documented, good-faith effort. In some cases, multiple Consulate interviews may be required as a part of the student's good-faith effort to receive the F1 approval. See your welcome letter in your acceptance packet for the required documentation. Failing the interview for lack of preparation or attempted fraud is not a reason for issuing refunds. When you have completed your Consular interview, let us know the results immediately. If for any reason your visa is denied, we can examine the reason and help you to prepare for a second or third interview.