



Applicant Information

Please fill in the following fields about the *applicant* as thoroughly as possible.

Student Name *

Student Nickname *

Student Date of Birth *

(mm/dd/yyyy)

Student Home Phone *

(Ex: 999-999-9999)

Student Cell Phone

(Ex: 999-999-9999)

Student Email Address *

Student Address

Street *

City *

Country *

State *

Zip *

Student Gender *

Student Ethnicity *

Student Country of Citizenship *

Primary Language Spoken at Home *

Birth City *

Birth Province *

Birth Country *

Do you speak other foreign languages? *

Yes No
If yes, what other languages?

English Name, if applicable

Nationality *

Passport Number

Passport Expiry Date

Country applicant will apply visa in *

ACT:

TOEFL: *

Other

What grade are you applying for: *

9

10

11

12

Student Interests

Sports

Boys Basketball	Cheerleading	Cross Country
Football (American)	Girls Basketball	Golf
Hockey	Wrestling	Girls Volleyball
Soccer	Softball	Other
Swimming	Tennis	

Activities

Campus Ministry	Choir	Drama
Faith in Action	Key Club	National Honor Society
Pep Band	Speech and Debate	Student Council
YMCA Youth Legislature	Youth Golerum	Other

Leisure

Art Exhibition	Athletics	Ballet
Camping	Cinema	Computer
Driving	Fashion	Fishing
Hiking	Horse Riding	Music
Photography	Surfing	Travel
Visiting Museums	Other	

If you selected Other in Sports, please explain.

If you selected Other in Activities, please explain.

If you selected Other in Leisure, please explain.

Previous Schools

Has the applicant previously attended another school or been home-schooled?

Yes No

Most Recent/ Previous School Attended

School Name *

Address

Street Address

City

State/Province Zip

Country

Phone

From Date

To Date

Grade Completed

Has the applicant previously attended any other school?

Yes No

Second Most Recent/ Previous School Attended

School Name *

Address

Street Address

City

State/Province Zip

Country

Phone

From Date

To Date

Grade Completed

Final Level of Education in Home Country *

Religious Affiliation

Please fill in the following fields about the *applicant's* Religious Affiliation.

Religious Affiliation *

Current Church/Congregation *

Phone

Location

Street Address

City

State/Province Zip

Country

Senior Pastor

Youth Pastor

Local Church Member?

Yes No

Will you need your host family's help with any religious activities? *

Yes No

If yes, please explain.

Are you willing to participate in religious activities with your host family? *

Yes No

Household

Please answer the following questions about the applicant's *primary* custodial household.

Home Address

Street Address *

City *

State/Province *

Country *

Zip *

Home Phone* (Ex: 999-999-9999)

Parent/Guardian One

Last Name*

First Name*

Middle Name

Suffix

Salutation*

Gender*

Male Female

Relationship to Applicant*

Custodial Rights?

Yes No

Financial Responsibility? *

Yes No

Receive Correspondence*

Yes No

Parent/Guardian Two(leave blank if not applicable)

Last Name*

First Name*

Middle Name

Suffix

Salutation*

Gender*

Male Female

Relationship to Applicant*

Custodial Rights?

Yes No

Financial Responsibility? *

Yes No

Receive Correspondence*

Yes No

Marital Status •

Marital Status •

Email 1 •

Email 1 •

Email2

Email2

Work Phone

Work Phone

Cell Phone•

Cell Phone•

Occupation

Occupation

Job Title

Job Title

Employer

Employer

EmployerAddress

EmployerAddress

Employer City

Employer City

Employer State

Employer State

Employer Zip

Employer Zip

Religious Affiliation

Religious Affiliation

**Current Church/
Congregation**

**Current Church/
Congregation**

Same as student's

Same as student's

Highest Level of Education

Highest Level of Education

School Name

School Name

Degree

Degree

Siblings

Does the applicant have any siblings?

Yes No

Sibling

Sibling Name *

Age *

Date of Birth

Gender

Male Female

Grade

Current School

New Student Interview

This form is to be completed by the applicant.
Please complete the following form to the best of your ability.

Personal Information

Have you ever lived or traveled outside your home country? *

Yes No

If yes, where?

Have you ever lived away from your parents? *

Yes No

If yes, please explain. *

Are you a member of any clubs? *

Yes No

If yes, please list the clubs.

Do you play a musical instrument? *

Yes No

If yes, which one(s)?

Are you interested in playing any athletics? *

Yes No

If yes, which one(s)?

Do you smoke? *

Yes No

Food and Other Preferences

Are there any foods you cannot eat? *

Yes No

If yes, please explain.

Are there any foods you do not like? *

Yes No

If yes, please explain.

Please list some foods that you enjoy very much:

Would you prefer a Homestay living experience? *

Yes No

Would you like to live with a family that has young children? *

Yes No

Would you like to live with a family that has teenage children? *

Yes No

Would you like to live with a family that has one or more other International students? *

Yes No

Would you like to live with a family that has pets? *

Yes No

Student Application Letter

This letter is an import part of your application. It is an opportunity for you to introduce yourself to your school and/or host family. Since this is a school application letter, please make sure that you focus on qualities and qualifications that are applicable to the school you're applying to. You should make your letter as friendly and personal as possible. To accomplish this you may want to briefly state your personal information your goals your hopes and future plans.

Student Signature

Date:

Parent Letter

Parent Application Letter

This letter is an important part of your child's application. Please provide information that will help us to understand your child's personality, interests and habits. To accomplish this you may want to briefly comment on your child's behavior and attitudes sense of responsibility, problem solving and communication skills.

Parent/Guardian Signature

Date:

Liability Release

The Undersigned, as parents or legal guardians of a student in a program organized and directed by GOED on behalf of ourselves and our successors or legal representatives, renounces any claim against GOED, its employees or partners or partner schools where the student may be assigned, or any person intervening in the program, that may arise due to injury, damage, sickness, accident, delay, unusual circumstances or expenses due to strikes, war, atmospheric conditions, quarantine, government restrictions, or regulations, or those derived from acts of omission of airlines, shipping companies, railroads, buses, transportation in general, hotels, restaurants, or any other service given by companies, individuals, or any related with aforementioned.

We understand that the student will be subject to the authorities and teachers of the school where he/she may live. We also understand that GOED and the family reserve the right to terminate participation in the program of any student whose conduct may be considered detrimental or incompatible with the interest and security of the program. If this decision is every taken, the student and his/her parents or legal guardians will have no right to any refunds.

We accept the right of GOED to, directly or indirectly, cancel, change, or substitute in emergencies, or whenever normal circumstances change, those parts of the program whose alterations may be considered necessary. Also to change, before and after departure, the cost of the program to meet unexpected changes in airfares, price of transportation in general, monetary devaluation, etc. We understand that should there be a geographic move of the student for any reason whatsoever the cost of transportation shall be borne by the student.

We guarantee GOED that, although we maintain in the future a friendly relationship with the school, and family, or families, with whom we may establish contact through GOED or its employees, we will not make use of this knowledge to send in the future, directly or indirectly, students, relatives, or friends, to said school, local coordinators, or families, unless it is through GOED. We also grant GOED permission to use in the future any photographic, or any other type of material in which the student may appear, for promotion or publicity of the organization's programs.

The student agrees to accept and uphold the standards of conduct set by GOED, the school where he/she may be assigned, and the family or families with whom he/she may live for the duration of the program. He/she also agrees to maintain friendly and respectful relations with his or her teachers and classmates and especially all members of the family with whom he/she may be living, to accept the rules of conduct imposed by said family, to participate in the family life as much as possible, to try his/her best adjust to the normal system of family life, and to treat all the members of the family with respect.

I/We have read and understood the Liability Release and agree to abide by the terms and conditions outlined therein.

Parent/Guardian Signature

Date:

Student Signature

Date:

Medical Release

We grant GOED, its employees or agent, the school where the student may be assigned, and the family or families with whom he/she may live that, at their discretion, and if necessary, at the cost of the participant or his/her parents or leg guardians - in the case of expenses exceeding the coverage of the insurance policy covering the student - the power to place his/her under the care of a local medical doctor for his/her treatment.

We also grant GOED, the school where the student may be assigned, and the family or families with whom he/she may live, all necessary permissions to act as legal guardians and "in loco parentis" in any situation, especially in emergencies, whether medical or other, including the possibility of permission for surgical operations or any other treatment.

We also authorized GOED, the school where the student may be assigned, and the family or families with whom he/she may live, to return him/her to his/her country of origin at his/her own cost or that of his/her parents or legal guardians, if necessary, to submit to medical treatment, if this is deemed necessary by the above mentioned people, after consultation with medical authorities. We confirm that at the time of signing this document, the student enjoys perfect health, and that his/her health record enclosed herewith is true and complete.

We also grant GOED, its employees or agent, the school where the student may be assigned, and the family or families with whom he or she may live, permission to act on our behalf in anything pertaining to possible representation before the local authorities.

This authorization shall be valid for the entire duration of GOED program in which the student is participating.

I/We have read and understood the Medical Release and agree to abide by the terms and conditions outlined therein.

Parent/Guardian Signature

Date:

Student Signature

Date:

Agreements

Travel Authorization

We, as Parents of the Undersigned Student, do hereby authorize GOED, Coordinator, and/or Host Family as our agents to determine the Student's travel for the length of his or her Program. It is understood that his Authorization is given in advance only when the Student is traveling and supervised by a Host Parent or by a Representative of a school program, or with GOED sponsored tours. We understand that the Student may not travel unsupervised.

Driving

GOED does not condone the driving of any automobile in the United States of America by its participants, except as part of an approved Drivers Education and Training Course.

Drivers Education Permission:

We give our full consent for our son/daughter to take a driver's education course (if available) during his/her stay in the U.S. on the GOED program. Most school-sponsored courses provide insurance coverage; however, if it is necessary to obtain additional insurance this experience will be our responsibility. I understand that while my son/daughter may be allowed to obtain a driver's license, he/she will not be permitted to drive outside of an approved class. Students can be dismissed from the program for violation. Butte Center Schools makes no recommendation to host families or related parties to allow the student to use their care during a driver's education course or to obtain a driver's license. If no car is available to use, it may not be possible to obtain a driver's license. GOED guarantees that this will be possible.

We give full consent

We do not give our consent

Program Rules

While in the United States, students must obey all federal, state, and local laws, as well as the rules set by the school, host family and GOED expects students to adjust to the family, school and community in which they have been placed. It is important to understand that there is no perfect host family, school or community. As a GOED student, you should be prepared to accept your placement, make every effort to become a member of the host family and community, and participate successfully in the academic portion of the Private High School Program.

- Drinking of alcoholic beverages is prohibited.
- Illegal use of drugs is prohibited.
- Driving of automobiles, except as outlined in the driving section of the application, is prohibited.
- Complying with all host family rules is obligatory.
- Complying with all school rules and striving to maintain grades at a "C" average is required.
- Students must return to their home country at the end of their Private High School Program.
- Independent travel by participants is not permitted during this program.

Release of School Records. and Application Authorization

To comply with GOED Program Rules for students, liability release, and federal regulations requiring international students to have financial sponsorship by a designated party, namely GOED, we, the undersigned parent and student, grant GOED access to transcripts, host family, information, grades, syllabuses, and/or course schedules and allow GOED to complete and sign applications and admissions documents on the student's behalf.

Program Termination

GOED reserves the right to terminate program participation for the violation of any program rules and/or when a student's mental and/or physical health as determined by GOED is in danger or jeopardy. We, the participant and his/her parents, have read and understood all of the above. As a participant, I agree to obey these rules. I understand that disobeying will result in my termination from the program, loss of full program fees and return to my home country at my own expense. I also affirm and understand that no refunds of school fees and accommodations will be granted post arrival in the U.S. or on or after the start date on the 1-20, whichever comes first. No refunds will be granted if a student transfers an 1-20 to a non-GOED high school at his/her own initiative during his or her course with GOED.

I/We have read and understood the enclosed agreements and agree to abide by the terms and conditions outlined therein.

Parent/Guardian Signature

Date:

Student Signature

Date:

Electronic Signature Page

Electronic Signature

The electronic signatures below and their related fields are treated by GOED like a physical handwritten signature on a paper form.

Agreements

My signature below affirms that all of the information contained in this application is correct, complete, and honestly presented. I understand that withholding or misrepresenting information in this application may jeopardize my child's admission.

ParenUGuardian Signature

Date:

Student Signature

Date: