1502 North Freedom Boulevard., Suite B
Provo, Utah 84604-2520 USA
Internet: www.selnate.com or info@selnate.com
Phone: +1 (801) 356-7060 • Fax: +1 (801) 356-7067

Application for Admission

Please print or type.

Name_____
Last *First* *Middle*

Birth date_____/_____/_____ *(must be at least 17 years old)*
Month Day Year

Gender ☐ Male ☐ Female

U.S. Telephone_____
Area Code-Number

Utah Address (if any)_____

_____
City *State* *Zip Code*

Foreign Telephone_____
Country Code-City Code-Number

Foreign Address_____

_____
City *Country* *Zip Code*

E-mail address_____

Country of Birth _____City of Birth_____

Country of Citizenship_____

Name of friend in the U.S. *(if any)*_____

Friend's Telephone_____

Parent or Guardian's Name_____

Parent or Guardian's Telephone_____

Do you have any serious medical conditions? ☐ Yes ☐ No
If yes, please explain_____

In case of emergency, whom should we contact?
Name_____

Telephone_____

Health and/or Accident Insurance Provider_____

Policy Number_____

Expiration Date____/_____/_____

Would you like to stay with a host family? ☐ Yes ☐ No
Would you like the I-20 sent by express mail (additional fee) ☐ Yes ☐ No
When do you plan to enroll?

☐ Winter Semester *(January-April)* ☐ Summer Semester *(May-August)* ☐ Fall Semester *(September-December)*

How did you learn about Selnate?
☐ Advertisement (which?):_____ ☐ Agent (name?):_____
☐ Friend (name?):_____ ☐ Other (please explain):_____

IMPORTANT! Selnate reserves the right to determine classes, levels, and schedules for all students. • Tuition and fees are subject to change without notice. Selnate accepts debit/ATM, Visa, MasterCard, American Express, and Discover cards.• Tuition and application fee **must** be received before Form I-20 will be sent. • Homestay and application fees are non-refundable beyond three (3) business days of receipt. • *Tuition refund policy:* After Selnate issues the Form I-20, if the student is unable to attend Selnate for any reason other than visa denial, the student must notify Selnate in writing at least 30 days before the beginning of the semester to receive a tuition refund. If Selnate is not notified at least 30 days before the semester begins, no refund will be made. If the visa is denied, the student is eligible for a full tuition refund. Tuition will not be refunded to students who withdraw from their studies after a semester begins. Tuition refunds will not be granted to students who are expelled from Selnate for violation of policies or standards. • *Homestay fees refund policy:* Homestay fees are calculated on a weekly basis. Selnate will refund homestay fees on a prorated basis for unused weeks, provided the student gives at least a two (2) week notice to school administration. If less than (2) weeks' notice is given, the minimum 2 weeks' notice shall be added to the cancellation date and the refund adjusted accordingly.

I certify that all of the information in this application is accurate and true. I understand that Selnate International School is not responsible for any injury or illness received while at Selnate and that I am responsible for obtaining my own health and/or accident insurance. I have read, understand, and agree to the policies shown on this application.

_____ _____ _____/_____/_____
Signature of Applicant Signature of Parent or Guardian (if student is under age 21) Date

Dependents

	Family Name	Given Name	Birth date	Country of Birth	Relationship to Applicant
Complete this portion ONLY if a spouse and/or child(ren) will be accompanying the student.	1._____	_____	____/____/_____	_____	_____
	2._____	_____	____/____/_____	_____	_____
	3._____	_____	____/____/_____	_____	_____
	4._____	_____	____/____/_____	_____	_____