

Please complete and sign this application. Please also send a copy of the participant's passport and unofficial school transcripts.

STUDENT INFORMATION

1. Family Name(s):	First Name:	Middle Name:	5. Country of Citizenship:
2. Street Address:			
City:	State/Department/Province:	Postal Code:	6. Country of Birth:
Country:	Telephone:	7. Where did you obtain this application?	
E-mail:	WhatsApp Number:		
3. Gender ☐ Female ☐ Male ☐ Other	4. Date of Birth (MM/DD/YY)		

Encompass Experiences Immersion programs are part-time in nature, and are suitable for students on ESTA/Visa Waiver Program or a B1/B2 Visitor Visa.

PREFERRED SCHOOL & PROGRAM DATES

1. Name or Location of Preferred School:			
2. Arrival/Start Date: (MM/DD/YY)		3. Departure/End Date: (MM/DD/YY)	
4. Grade in your Current School:			

I WOULD LIKE AIRPORT TRANSFERS:

- ☐ Arrival - From the airport to the host family or dormitory.
- ☐ Departure - From the host family or dormitory to the airport.

My arrival airport will be:

HOUSING OPTIONS

- ☐ I don't need housing provided by the school.
- ☐ I prefer homestay.
- ☐ I prefer dormitory/residence (School dormitory is available at Ontario South only).

MEDICAL INFORMATION

Do you have any allergies we should be aware of (please list):

Do you currently take any medications we should be aware of (please list):

PARENT/GUARDIAN INFORMATION

Father's Name:

Father's Telephone Number:

Father's Email address:

Mother's Name:

Mother's Telephone Number:

Mother's Email address:

PARENTAL AUTHORIZATION FOR MINORS

I authorize Encompass Experience and its partner schools to allow any necessary and appropriate emergency medical services for my child in case of illness, and release them from all forms of liability. I agree to provide health insurance information for my child prior to his/her arrival in the United States.

Date (MM/DD/YY)

Relationship to student (parent, guardian, etc.):

Signature

FAMILY VISITATION

For students under the age of 18 who intend to arrange a visit with relatives during their immersion program, the student's parent or guardian must complete and sign a Family Visit Authorization Form. This form may be obtained upon request from any Encompass Experiences team member.

Date (MM/DD/YY)

Signature

PHOTO RELEASE

Encompass Experiences and its partner schools may take photos or videos of your child for promotional or educational purposes. Your child's participation in the immersion program presumes your consent. Please contact info@encompassexp.net for information or to opt out.

Thank you for your application! You will receive an invoice to pay the Encompass Application Fee as well as any application fees required by the school. Once the fee is received we will complete the student's application and send a Welcome Letter to you.