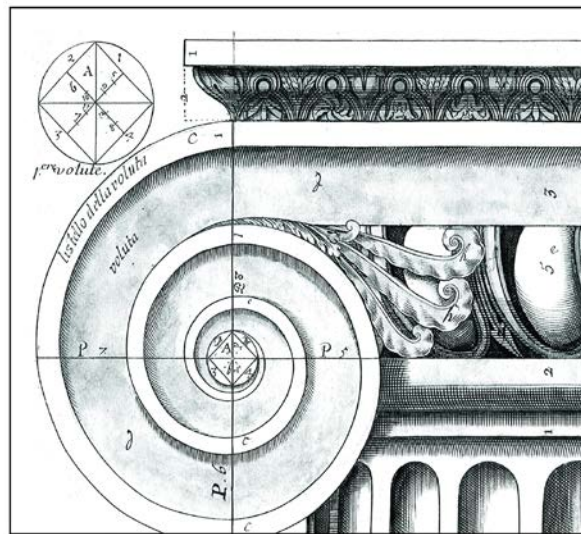


ROCKBRIDGE ACADEMY

Application for Admission for International Students



911 Generals Hwy • Millersville, MD 21108
Telephone 410-923-1171 • Fax 410-923-6588
admissions@rockbridge.org
www.rockbridge.org

*While Rockbridge Academy accepts applications for admission year round,
families are encouraged to apply prior to the second week in January.*

We appreciate your thoughtfulness in providing all information requested. Applications are kept confidential. Please complete a separate application for each child. A family interview via Skype will be arranged by the Admissions Director upon receipt of this completed application, the application fee, and all required supporting documents and records.

Application Procedures for International Students

Consultants should not fill out forms on behalf of teachers, school administrators, or students. International student applications will be considered when all of the following are received by our Admissions Office:

- Completed Rockbridge Academy application
- Two-paragraph hand-written essay in English on “Why I Want to Attend Rockbridge Academy”
- Official academic transcripts and report cards translated into English
- Demonstration of level of English proficiency (TOEFL scores and previous schoolwork completed in English)
- Application fee of \$150 paid online
- Two letters of recommendation from teachers or school administrators translated into English
- Copy of identification page from the applicant’s passport or visa for transfer students
- Photo of the prospective student and his or her family
- Biography that includes student’s hobbies, sports, activities, travel, and interests
- International Student Financial Disclosure form

Upon acceptance the following items are required for enrollment:

- Birth certificate and official certificate of applicant’s immunization status translated into English that comply with [Maryland immunization requirements](#).
- Proof of medical insurance coverage in the U.S. (copy of card or policy number)
- Medical Treatment Authorization form
- Signed Enrollment form
- International student tuition deposit paid online

You may mail the completed application and related materials as a hard copy to Rockbridge Academy, Attn: Admissions Director, 911 Generals Hwy, Millersville, MD 21108 or scan the completed application materials and send them to admissions@rockbridge.org via email.

For office use only:

Application fee Date received: Received by:	Applicant records/transcripts/homeschool summary Date received: Received by:	Applicant standardized test scores Date received: Received by:
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Applying to enter grade _____ for September 20 _____ *or* mid-year 20 _____

Has the applicant applied to our school before? **Yes** **No** If yes, for which grade/year? _____/_____

Applicant Information

Applicant's Family Name/Surname Given Name & Middle Name Preferred Name

Male Female

Student Email Address

Mailing Address

Phone Number

City State/Province

Zip Code

Date of Birth

Country of Birth

Country of Citizenship

Current School

Current Grade

Grades Attended

Current School Mailing Address

City State/Province

Zip Code

Current School Phone Number

Current School Contact Person and Title

Contact Phone Number

How did you hear about Rockbridge Academy?

Family Information

Father/Guardian Name

Relationship to Applicant

Address

City State/Providence Zip Code

Phone Number

Email address

Church Name and City

Member? Yes No

Employer

Occupation/Position

Secondary Education and/or Training:

Check if appropriate:

- Parents separated* Parents divorced*
 Father deceased Mother deceased
 Father remarried Mother remarried
 Single parent

*If parents are divorced or separated, to whom should correspondence be sent? _____

Family friend or relative living in the U.S.:

Name(s)

Address

City State Zip Code

Phone Number

Email address

Mother/Guardian Name

Relationship to Applicant

Address

City State/Providence Zip Code

Phone Number

Email address

Church Name and City

Member? Yes No

Employer

Occupation/Position

Secondary Education and/or Training:

Applicant lives with (check all that apply):

- Both Parents/Guardians listed above
 Mother Father
 Stepmother Stepfather

Family Information *(continued)*

What characteristics of our school interest your family, and why is our school a good match for the applicant?

Has the applicant been evaluated regarding cognitive reasoning, achievement, skills, executive function, and/or language development? Yes No

If yes, please explain: _____

Does the applicant take prescribed maintenance medication?

Yes No

If yes, please specify: _____

Applicant's siblings:

Name	Birth date	School	Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Authorization

We (I) affirm that the information provided in this application is true to the best of our (my) knowledge and we (I) have read and will support the Statement of Faith (contained in the Parent/Student Handbook) and agree to abide by the policies, procedures, and guidelines contained in the Parent/Student Handbook:

Signature of Father/Guardian _____ Date _____

Signature of Mother/Guardian _____ Date _____

ROCKBRIDGE ACADEMY, INC. ADMITS STUDENTS OF ANY RACE, COLOR, NATIONAL, AND ETHNIC ORIGIN TO ALL THE RIGHTS, PRIVILEGES, PROGRAMS, AND ACTIVITIES GENERALLY ACCORDED OR MADE AVAILABLE TO STUDENTS AT THE SCHOOL. IT DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, NATIONAL, OR ETHNIC ORIGIN IN ADMINISTRATION OF ITS EDUCATIONAL POLICIES, SCHOLARSHIPS, OR OTHER SCHOOL-ADMINISTERED PROGRAMS.