

Application Form

41 W Santa Clara Street Arcadia, CA. 91007 Tel: (626)623-6339 Fax:(626)623-6293

	Student 1	Information	ı		
Date of application/	e of application//Applying School Year □ Fall □ Spring □ Summe				
Grade Entering $\Box 6^{th} \Box 7^{th} \Box 8$	th 9 th 10 th	□11 th □12 th So	cial Security #		
Student's Name Last			Male	Female	
Student's Address	First	Middle			
Home Phone () Date of Birth//_ Citizenship					
E-mail address:		mm dd	уууу		
D 4 #1		Information			
Parent #1					
Partner if not child's mother/fat	her	Partner if not o	child's mother/fa	ather	
Address		Address			
CityState	Zip	City	State	Zip	
Home Phone Number		_ Home Phone N	Number		
Occupation		_ Occupation			
Employed by		_ Employed by			
Business Phone Number		_ Business Phon	Business Phone Number		
If parents are divorced, with wh	ich one is stud	ent living?			
Check here if you would like du	ıplicate mailing	g 🗖			
List brothers and sisters of appl	icant:				
Name Age Present School					
Ethnic Background (Voluntary	for reporting p	urposes)			
African American	☐ Native American ☐ Caucasi		Caucasian		
Hispanic American	Asian American		Other		

Student Education Information

School Address:				
chool Telephone: () Grade Completed:				
Name of Principal:				
Type of School: Public Independent _				
Has the applicant had any scholastic difficulty?	☐ Yes	□ No		
Disciplinary problems?	☐ Yes	□ No		
Problems with truancy?	☐ Yes	□ No		
Absences due to illness?	☐ Yes	□ No		
Difficulty with civil authorities?	☐ Yes	□ No		
Suspended or expelled from any school?	☐ Yes	□ No		
Explain "Yes" answers:				
Please list the other schools to which you are applying:				
Have you known or are you related to an Excelsior School and relationship(s):		give the name(s)		
Through what source did you learn of Excelsior School? _				

Parent Statement

Why are you applying to The Excelsior School?					
We welcome an	y additional comments w	hich you might like to make about your child.			
A parental persp	pective helps us to know	each applicant more completely.			
- 					
Describe any sn	acial circumstances or le	arning needs which may have affected the applicant's			
		d/or academic support the applicant has received.			
_	itation as appropriate.	wor deddenie support the applicant has received.			
		nool, a parent or guardian must complete this form and le application fee of \$75.00 (\$150.00 for international			
		Excelsior School. By signing this application you are			
agreeing to abid	e by the Terms and Conc	litions of admission and enrollment agreement.			
Date		Signed Parent or Legal Guardian			
		Office Use			
	Date Received:	Fees Collected:			

International Transfer Students

After acceptance, international students who are in USA must provide copies of the following documents before an I-20 can be issued:

- 1. Current I-20 issued
- 2. I-94 form with admissions
- 3. Visa
- 4. Passport
- 5. Immunization record: a current Mantou test (TB) is required
- 6. Documentation showing proof of financial means of support, i.e. Bank Verification of Funds, required by the INS when sending completed I-20