



International Student Application Form

227 9th Street, Miami Beach FL 33139, USA, Phone (305) 397-8298, info@southbeachlanguages.com www.southbeachlanguages.com

Student Information (All information below must be exactly the same as it appears on your passport. Please print clearly.)

Family Name _____

First Name _____ Middle Name _____

Date of Birth (MM/DD/YYYY) ____/____/____ Gender: Male Female

Phone # _____

Email _____

Country of birth _____ Country of citizenship _____ Native Language _____

Permanent Address in your country: _____

Local USA Address (if known): _____

Emergency Contact Name

Emergency Phone #

Relationship

Enrollment Information

Studying English should be linked to an academic, professional or personal objective. Please describe why you want to improve your English (be specific):

Highest level of education completed:

On a scale of 1 (Beginner) to 10 (Advanced), how would you rate your level of English?

I am applying for:

- Initial F1 Visa
- Transfer F1 Visa
- Change of Visa Status
- Re-Entry

Are you applying with any dependents (F2):

Yes No How many? _____

Contact us if you plan to bring dependents.

I have included a recent bank letter:

- From my own account
- From my parent's or sponsor's account

How many weeks do you plan to study? _____ weeks

What date do you wish to begin classes? (Classes begin every Monday. The i20 form must specify a start date)

____/____/____
MM DD YYYY

How did you hear about South Beach Languages?

- Internet
- Friend
- Walk in
- Other: _____

Payment Information

Students can pay by credit card or via Paypal on our website. Select your program from the below table. Multiply by the number of weeks you will study to get your total tuition. Pre-paying more weeks reduces the rate. Enter the amount in the Calculator-> +\$150 Registration fee +\$100 Express mail fee (if we are sending I-20). Note: tuition is refundable if visa is denied.

Program	Schedule	8-10 weeks	12-22 weeks	24-46 weeks	48+ weeks
Morning Intensive	9am-1:30pm or 11:30am-4pm	\$180	\$155	\$145	\$125
Afternoon Intensive	2-6:30pm or 4:30-9pm	\$140	\$130	\$120	\$99
Super Intensive	9am-4pm or 11:30am-6:30pm	\$225	\$200	\$180	\$160

TUITION CALCULATOR

Weeks _____
(multiply by weekly price)

= Tuition: _____

+ Registration: \$150

+ Mail Fee: \$100

Total _____

If the name on the credit/debit card you are providing is different than your name, please provide a copy of the front and back of the card and a copy of cardholders photo ID/passport.

Name as it appears on card _____

Credit Card Account # _____

Expiration Date (MM/YY) ____/____ Security Code (last digits on back of credit card) _____

I _____
hereby authorize South Beach Languages, to charge my credit/debit card for the total amount indicated above.

Cardholder's Signature _____

Date (MM/DD/YYYY) _____

Applicant's Pledge

I have read and understood the estimated costs of attending South Beach Languages. I have enough money available to pay for all expenses, including tuition, registration fee, health insurance, meals, housing and personal expenses. I understand F1 students must attend minimum 18 hours per week and follow US F1 visa regulations. I understand SBL's refund policy. I certify that all statements on this form are correct.

Full Name _____

Signature _____

Date (MM/DD/YYYY) _____