

Acknowledgement of Foreign Exchange Student Guidelines & Application for Enrollment

Exchange Requested For:				
Exchange Student's Full Name:		Exchange Student's Home Country:		
Exchange Organization:		Exchange Organization Area Representative and Phone number:		
Host Family Name(s):		Host Family Address:		
BISD High School (For BISD Use Only):		Requested School Year of Enrollment (For BISD Use Only):		
Required Documents / Records: (All items	must be included in or	der for a st	udent application	to be accepted for consideration of placement.
Signed Acknowledgement of BISD Foreign Exchange Student Guidelines (Signatures Below)			School Acceptance / Authorization to Enroll Form (Provided by Foreign Exchange Organization)	
Student's Birth Certificate/Passport			Student's Immunization Records (Translated into English)	
Student's Official High School Transcript From Home Country (Translated into English)			Host Family Proof of Residency	
By signing below, I acknowledge that I have re Guidelines. I understand that failure to abide to organization area representative, will cause the future placement of foreign exchange students	by any of the guideling exchange student's	nes either s immedia	by the exchang te withdrawal fr	e student, the host family, or the exchang om the ÓlÙÖ and could negatively affect
Exchange Area Representative (Signature) Exchan		ge Area Representative (Printed Name)		
(Signature) Host Family (Prin		nted Name)		
************	**********For BISE) Use Or	ly*******	*****
Host Family Proof of Residency Checked (Cl	•		ater	Lease agreement
Required Documents/Records & Signatures	Checked			
Copy of J-1 Visa received				
Denied for Enrollment (Reason):				
Approved for Enrollment by:				

