

Full-Time Student Application

Requirements & Deposits

Please complete the attached application form and include the following:

- (a) A non-refundable application fee of US \$100.
- (b) A non-refundable enrollment deposit of US \$250. This will be credited towards your first session tuition.
- (c) A non-refundable fee of US \$90 for Express Mail option (If applicable).
- (d) A non-refundable fee of US \$75 for Airport pick-up (If applicable).
- (e) A bank statement, less than 6 months old, showing a minimum of US \$8,000 for initial students for 4 months or US \$3,000 for transfer students for 2 months, in available funds in your bank account or your sponsor's bank account.
- (f) A guarantee letter of financial support from the person, business, or organization providing you with financial support while studying in the United States (If applicable).
- (g) A copy of your passport.
- (h) Proof of health insurance if you have it already. If not, you need to purchase it before your session start date. Please see below.

****Transfer students also need to include the following:**

- (i) Your I-20 form from previous school.
- (j) A completed transfer release form signed by your previous school's international advisor.

Submitting Application

Please send the completed application and required documents by mail, fax, or email to:

Mailing Address:

Admissions
Boston International Academy
1642 Commonwealth Ave.
Brighton, MA 02135 USA

Fax:

617-731-6391

E-mail:

biaboston@gmail.com

Acceptance

After receiving all of the required documents and payments, BIA will review your application. Upon acceptance, BIA will send you an acceptance packet which includes:

- An acceptance letter
- A signed I-20 Form
- Instructions on how to apply for a F-1 visa in your country
- Housing Information
- Health Insurance Information
- Instructions on what to do upon arrival in Boston
- Airport Pick-up Form

Please note: **Full-time** students who are enrolled in intensive English language study (**minimum 20 hours per week**) are required to be issued an I-20 form and apply for an F-1 visa. **Part-time** students (**maximum 16 hours per week**) are not required to apply for an F-1 visa.

Registration

You must report to BIA and register before your session start date. Please be prepared to pay tuition in full and take the placement test (approximately 1 hour). You must bring the following with you:

- Passport and Visa
- I-94 Form
- Signed I-20 Form
- Tuition Payment
- Proof of Health Insurance

Health Insurance Requirements

Prior to your session start date, you must provide proof of health insurance. It is a Massachusetts State Law that all students have health insurance. If you are unable to provide evidence of health insurance you will be required to purchase it. BIA will provide contact information for affordable health insurance companies.

Tuition Payment

Please note that tuition must be paid in full when you register for your first session, before the start date. We accept: cash, personal US checks, traveler's checks, bank drafts, credit cards (Visa, MasterCard) or wire transfers.

Refunds

If you cancel at any time prior to your first session start date, all payments will be refunded **except** the application fee, and tuition deposit (and Express Mail and Airport Pick-Up if applicable). If you decide not to study at BIA after your session start date, we regret to inform you that the tuition and other fees will not be refunded.

Housing

Although BIA does not offer housing, we will assist you in finding a place to live. We work with local real estate agents and homestay companies.

Airport Pick-up

We provide a pick-up service from the airport for \$75. If you are interested in this service, please email or fax BIA the airport pick-up form. If your flight information changes, please contact BIA as soon as possible with the new flight information.

Attendance Commitment

All students must enroll in our full-time program. Classes run from 9:30 AM to 1:30 PM, Monday through Thursday. Students must attend a minimum of 75% of their total classes in order to maintain F-1 status.

Initial students are required to register and attend a minimum of 4 sessions.

Transfer students are required to register and attend a minimum of 2 sessions.



Tuition

		ESL Classes		TOEFL Classes		First Payment
Full Time Students	Initial Students	<ul style="list-style-type: none"> US \$3,400 for 4 months After 4 months, the tuition for initial students will be reduced to \$1,100 for 2 months 		<ul style="list-style-type: none"> US \$3,400 for 4 months After 4 months, the tuition for initial students will be reduced to \$1,200 for 2 months 		<ul style="list-style-type: none"> Application Fee (\$100) Enrollment Deposit (\$250) Document Review Fee for changing visa (\$350, if applicable)
	Transfer Students	Rate		Rate		
		1 month (4 weeks)	\$750	1 month (4 weeks)	\$800	
		2 months (8 weeks)	\$1,400	2 months (8 weeks)	\$1,500	
		3 months (12 weeks)	\$2,000	3 months (12 weeks)	\$2,100	
4 months (16 weeks)		\$2,400	4 months (16 weeks)	\$2,600		
	<ul style="list-style-type: none"> 2 months, 3 months, and 4 months prices will be reduced if students continue to attend at BIA. 		<ul style="list-style-type: none"> 2 months, 3 months, and 4 months prices will be reduced if students continue to attend at BIA. 			
Part Time Students (No I-20 needed)	\$600 / 1 month \$1,000 / 2 months		\$650 / 1 month \$1,100 / 2 months		<ul style="list-style-type: none"> Application Fee Enrollment Deposit 	
	<ul style="list-style-type: none"> 2 months, 3 months, and 4 months prices will be reduced if students continue to attend at BIA. 		<ul style="list-style-type: none"> 2 months, 3 months, and 4 months prices will be reduced if students continue to attend at BIA. 			

Help Line

If you need help completing this application, please call us at **(617) 731-6390** or Email us at **biaboston@gmail.com**. Our staff will be happy to assist you.

Boston International Academy Application

PERSONAL INFORMATION

LEGAL NAME IN FULL

LAST NAME

FIRST NAME

MIDDLE

HOME COUNTRY ADDRESS

STREET NUMBER, STREET NAME

CITY/TOWN

STATE/PROVINCE

ZIP CODE

COUNTRY

MAILING ADDRESS IN USA

STREET NUMBER, STREET NAME

CITY/TOWN

STATE

ZIP CODE

PHONE ()

(AREA CODE) PHONE NO.

CELL PHONE ()

(AREA CODE) PHONE NO.

EMAIL ADDRESS

GENDER

MALE

FEMALE

DATE OF BIRTH

MM / DD / YYYY

BIRTH PLACE

COUNTRY OF BIRTH

NATIONALITY

EMERGENCY CONTACT

NAME OF PERSON

RELATION TO PERSON

PHONE NO.

PASSPORT AND VISA INFORMATION

PASSPORT NUMBER: _____ **EXPIRATION DATE:** _____

CURRENT VISA STATUS (IF APPLICABLE) F-1 J-1 H-1B B1 B2 OTHER _____

EXPIRATION DATE OF CURRENT STATUS: _____ **D/S:** _____
DURATION OF STAY

PLEASE STATE ANY DEPENDENTS – YOUR WIFE/HUSBAND AND/OR CHILD/CHILDREN

NAME: _____ DOB: _____ Country of Birth: _____ RELATIONSHIP: _____

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AGENT INFORMATION

I CERTIFY THAT I WAS RECRUITED TO BIA BY _____
AGENT COMPANY NAME

WEBSITE _____ CONTACT NAME _____ CONTACT NUMBER _____

INITIAL STUDENTS (NEW I-20 FORM, FIRST TIME F-1 VISA APPLICANTS)

MAIL ORDER REQUEST

I would like my I-20 form sent via express mail. I understand I will need to include \$90 in my application for this option.

I would like my I-20 form sent via regular mail.

TRANSFER STUDENTS

I-94 CARD NUMBER _____

I CERTIFY THAT I AM/WAS MOST RECENTLY A FULL-TIME STUDENT AT _____
NAME OF SCHOOL

INTERNATIONAL STUDENT ADVISOR NAME _____ CONTACT NUMBER _____

SEVIS ID NUMBER _____ LAST DAY OF CLASS STATED ON I-20 FORM (MM / DD / YYYY) _____

PROGRAM AND SESSION INFORMATION

PLEASE CHECK THE PROGRAM YOU WOULD LIKE TO ATTEND:

TOEFL ESL OTHER _____

HOW MANY SESSIONS WILL YOU ATTEND? _____

- ❖ It may take 1 month to 3 months to receive your visa. Please put that into consideration when choosing the session you would like to begin.
- ❖ Please note that each level is broken into 4 sessions, each covering a section of the book. 4 sessions covers 1 entire book equivalent to 1 level.

PLEASE CHECK THE SESSIONS YOU WOULD LIKE TO ATTEND:

2010		2011	
<input type="checkbox"/> Jan 4 - Jan 29	<input type="checkbox"/> Jun 28 - July 23	<input type="checkbox"/> Jan 3 - Jan 28	<input type="checkbox"/> Jun 27 - July 22
<input type="checkbox"/> Feb 1 - Feb 26	<input type="checkbox"/> Jul 26 - Aug 20	<input type="checkbox"/> Jan 31 - Feb 25	<input type="checkbox"/> Jul 25 - Aug 19
<input type="checkbox"/> Mar 1 - Mar 26	<input type="checkbox"/> Aug 30 - Sep 24	<input type="checkbox"/> Feb 28 - Mar 25	<input type="checkbox"/> Aug 29 - Sep 23
<input type="checkbox"/> Mar 29 - Apr 30	<input type="checkbox"/> Sep 27 - Oct 22	<input type="checkbox"/> Mar 28 - Apr 22	<input type="checkbox"/> Sep 26 - Oct 21
<input type="checkbox"/> May 3 - May 28	<input type="checkbox"/> Oct 25 - Nov 19	<input type="checkbox"/> May 2 - May 27	<input type="checkbox"/> Oct 24 - Nov 18
<input type="checkbox"/> May 31 - Jun 25	<input type="checkbox"/> Nov 22 - Dec 17	<input type="checkbox"/> May 31 - Jun 24	<input type="checkbox"/> Nov 21 - Dec 16

SOURCE INFORMATION

WHERE DID YOU HEAR ABOUT BIA?

- Friend (Full Name): _____ Agent
- Internet (Website address): _____ Outdoor Sign
- Newspaper: _____ Other _____

MEDICAL EMERGENCY STATEMENT

In the event of illness or injury, I authorize medical treatment and release of medical information for medical treatment and insurance purposes. I accept responsibility for medical expenses outside the limits of my health insurance. I declare this statement to be true and understand I may be expelled if this statement is false.

FINANCIAL STATEMENT

I understand that I will need at least US \$1,000 for living expenses each month in addition to the tuition cost at BIA. I agree to be responsible for these expenses. I declare this statement to be true and understand I may be expelled if this statement is false.

I have read the information in this application provided by BIA. I understood and acknowledge BIA tuition, refund, and attendance policies. Submission of this signed application constitutes an acceptance of the terms and conditions stated above, as well as in agent and transfer school information and in the medical emergency and financial statements.

SIGNATURE OF APPLICANT

DATE

PARENT OR GUARDIAN

DATE

(If applicant is under 18)

DEPOSIT & FEES PAYMENT METHOD

I would like to make payment by:

1) CHECK MONEY ORDER

Note: All checks must be drawn from a United States bank and must have the bank name imprinted on the check.

2) **Credit / Debit card** (Select one) VISA MASTERCARD

CARDHOLDER NAME (PLEASE PRINT): _____

SIGNATURE: _____

CARD NUMBER: _____

EXPIRATION DATE: _____

3) **Wire transfer** (BIA bank account information is as follows):

ACCOUNT NAME: Boston International Academy (BIA)

ACCOUNT #: 004601370203

BANK NAME AND ADDRESS: Bank of America, 100 Federal Street, Boston, MA 02110

BANK OF AMERICA Swift Code: BOFAUS3N, CHIP #: 0959

Letter of Financial Support

I, _____ will be providing _____ with financial
Name of sponsor Name of student

support during his/her study at Boston International Academy. I understand the cost of attending Boston International Academy is approximately \$1,750 per month for full tuition and housing. I have adequate funds to support his/her academic endeavors. A bank statement is being provided for your review.

Signature: _____

Relation to student: _____

Date: _____

Please attach a bank statement in English, less than 6 months old that shows total USD amount in available funds.

FOR OFFICE USE ONLY

Deposit Amount: _____ Date: _____

Amount Due Upon Registration: _____

I-20 Issue Date: _____

Received Required Docs:

Bank Statement Copy of previous I-20 Copy of Passport Copy of Visa Copy of I-94

Copy of Health Insurance Proof Transfer Release Form Dependant Documents

Agent Commission Due: _____

(Date)

(Amount)

Refund Issued:

(Date)

(Amount)