



**PARENT ANSWERS**

Please state briefly your reasons for wanting your child to study in America.

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Please state briefly your personal testimony of your faith.

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International Exchange students pay the current school year tuition. Please refer to our website at [www.kingsschool.info](http://www.kingsschool.info), under FORMS for current school year tuition. There is also a PER DAY host family living expense fee each year for the student to reside with one of our approved host families. Both the tuition and host family fee is due before the student may begin their first day of school. Most families choose to wire transfer the tuition and fees to The King's School. Call 518-654-6230, once student is accepted, to arrange this. Please sign below.

*"I understand that upon my student's acceptance at The King's School, tuition and fees have to be paid in full in advance of program start date, in order for my student to start at The King's School."*

Parent's Signature \_\_\_\_\_

Parent's Signature \_\_\_\_\_

**MEDICAL INFORMATION**

Overall physical condition \_\_\_\_\_  
\_\_\_\_\_

Is your child able to participate in a full Physical Education Program?  Yes  No

Does your child have any of the following:

- |  |  |   |                                    |
|--|--|---|------------------------------------|
| <input type="checkbox"/> Heart Condition | <input type="checkbox"/> Fainting        | <input type="checkbox"/> Diabetes       | <input type="checkbox"/> Asthma    |
| <input type="checkbox"/> Epilepsy        | <input type="checkbox"/> Hearing Problem | <input type="checkbox"/> Vision Problem | <input type="checkbox"/> Allergies |
| <input type="checkbox"/> Depression      | <input type="checkbox"/> Other           |   |                                    |

Briefly explain any above condition(s):

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*\* Note: Medical insurance coverage is highly suggested for all international students. Accidental Medical insurance is also suggested. Dental insurance is not mandatory.*

**ACADEMIC INFORMATION**

Please identify the student's English language proficiency:   \_\_ Poor   \_\_ Good   \_\_ Excellent

Has the student ever failed a course(s)? \_\_\_\_\_ If yes, which course(s)

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Has the student repeated any grades? \_\_\_\_\_ If yes, which grade \_\_\_\_\_ and what year \_\_\_\_\_

Schools Attended: List the last two schools, starting with the most recent.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Does the student have any academic problems? If so, please supply details so we can establish whether, and how, we can meet the student's needs.

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Does the student have, or has he / she experienced any social problems? (*Explain*)

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Does the student have, or has he / she experienced any behavioral problems? (*Explain*)

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Please list student's interests and hobbies (*for example; soccer, piano, stamp collecting etc.*)

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Is there anything else you wish to convey to the school?

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A successful experience depends upon the student making his / her best effort in every area of school life. The School reserves the right to dismiss students and return them home, at the parent's expense, without tuition refund, for violations of the school's conduct codes.

Please notify the school of any change of address or telephone number.

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

Parent's signature \_\_\_\_\_ Date \_\_\_\_\_

## DOCUMENT CHECKLIST

Please ensure that all required information is enclosed with your application.

1. Completed International Student Application Form.
2. Completed International Pastor's Questionnaire.
3. Copy of a report card from the most recent school year, translated into English if necessary.

Please mail your completed application and accompanying documents to:

Mr. Peter Bevan

The King's School

PO Box 300

Lake Luzerne, NY 12846

or email the documents to: [pbevan@kingsschool.info](mailto:pbevan@kingsschool.info)