



# JUNIOR PROGRAMS APPLICATION FORM

## PERSONAL INFORMATION

Exactly as it appears on your passport:

Name	<input type="checkbox"/> Mr. _____					
	<input type="checkbox"/> Ms. _____		Last		First	
Address (Permanent)	Street					City
	State or Province			Postal code	Country	
Telephone				Fax		
Email Address				Country of Citizenship		
Date of Birth	Month: (e.g. January 20, 2005)	Day:	Year:	City of Birth	Country of Birth	

## PARENT/GUARDIAN INFORMATION

Name			Relationship		
Address (Permanent)	Street				
	City				
	State or Province		Zipcode	Country	
Telephone				Email Address	

How did you hear about CISL?  Website  Agency  Friend/Relative  Previous Student

Other: \_\_\_\_\_

## PROGRAM SELECTION

Number of Weeks	<input type="checkbox"/> 2 weeks	<input type="checkbox"/> 3 weeks	<input type="checkbox"/> 4 weeks	<input type="checkbox"/> 2+trip	<input type="checkbox"/> 3+trip
Start Date	Month:	Day:	Year:	End Date	Month: Day: Year:

Note: Please visit our website for program dates

### Junior Summer Programs

#### San Francisco:

UC Berkeley Campus

#### Los Angeles:

LMU Campus

LMU Campus + California Trip

#### San Diego:

USD Campus

USD Campus + California Trip

USD July Homestay

USD July Homestay + California Trip

#### Washington, D.C.:

Georgetown Campus

#### New Haven:

Yale Campus

#### Chicago

LUC Campus

### Junior Winter/Spring Programs

San Diego Homestay

San Francisco Student Residence

## ENGLISH LEVEL

Low Intermediate

Intermediate

High Intermediate

Advanced

## ARRIVAL & DEPARTURE INFORMATION\*

Reservation Number (please provide if available):					
Arrival	Month:	Day:	Year:	Time:	Airline:
					Flight No./Res. Code
CISL Transfer Service Requested: <input type="checkbox"/> yes <input type="checkbox"/> no			CISL UNMS Service Requested?: <input type="checkbox"/> yes <input type="checkbox"/> no		
Departure	Month:	Day:	Year:	Time:	Airline:
					Flight No.
CISL Transfer Service Requested: <input type="checkbox"/> yes <input type="checkbox"/> no			CISL UNMS Service Requested?: <input type="checkbox"/> yes <input type="checkbox"/> no		

\* A copy of the tickets is required once ticketing is completed by the airline. This is to insure the safe arrival and departure transfer for your student. Additional fees will be applied for a residential student requesting an Unaccompanied Minor Service (UNMS).

## ACCOMMODATION

Homestay       University       Student Residence (SF Program only)      Number of Weeks: \_\_\_\_\_

Arrival Date: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year \_\_\_\_\_      Departure Date: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year \_\_\_\_\_

Do you have any allergies or medical conditions? \*\*  Yes       No (If yes, explain:) \_\_\_\_\_

\*\* Pursuant to the Connecticut Youth Camp Licensing Board, all students applying to the Yale Junior Program are required to send us a copy of their annual health appraisal/physical exam and list of current immunizations (prior to arrival) in order to attend the program at Yale.

## HOMESTAY ONLY

What are your hobbies/interests? \_\_\_\_\_

Do you like pets?  Yes  No      Do you like children?  Yes  No

Notes: \_\_\_\_\_

## PAYMENT INFORMATION

I affirm that I will pay CISL the amount of \$ _____ by the following method:			
Payment Method	<input type="checkbox"/> Bank Wire Transfer <small>We will contact you with bank wire information</small>	<input type="checkbox"/> Credit/Debit Card	<input type="checkbox"/> TransferMate
NOTE: A \$150 (\$USD only) refundable security deposit is required upon arrival to the campus; deposit is returned after check-out is completed by CISL and University Staff to insure nothing is lost or broken.			

**Agreement:** This agreement is a legally binding instrument when signed by me and accepted by the School. I have read, understood, and agree to the terms and conditions, the refund and cancellation policy, schedule, prices, and starting dates. I confirm that I have sufficient funds to pay all the necessary costs of the program during my child's entire stay at CISL. In case of illness or injury, I grant permission for my child to be examined or treated as necessary. I agree to provide medical insurance to cover my child during the duration of the program.

Any questions or concerns regarding entering the United States that have not been answered or resolved by the school, must be directed to my local consulate or Embassy, or U.S. Immigration and Customs Enforcement (ICE) ([www.ice.gov](http://www.ice.gov)).

**Photo Release:** Students agree to allow photos and video taken during the program to be used for publicity purposes.

Please sign, and return to CISL San Diego or  
CISL San Francisco via email, fax or post.

**CISL San Diego**  
636 Broadway, Suite 210  
San Diego, California 92101  
Ph. +1 619 501 0205  
Fax. +1 619 239 3778  
E-mail: [juniorprograms@cisl.edu](mailto:juniorprograms@cisl.edu)

**CISL San Francisco**  
605 Market St., Suite 1400  
San Francisco, California 94105  
Ph. +1 415.495.7470  
Fax. +1 415.495.7467  
E-mail: [sf@cisl.edu](mailto:sf@cisl.edu)

\_\_\_\_\_  
Applicant Signature (Required to process application)

E-Signature Option: By checking the box and typing my name above, I confirm that all the information provided in this application is accurate, and that I have read and agree to the terms and conditions listed within this form.

\_\_\_\_\_  
Parent/Guardian Signature (Required if applicant is under 18 years of age)

E-Signature Option: By checking the box and typing my name above, I confirm that all the information provided in this application is accurate, and that I have read and agree to the terms and conditions listed within this form.

\_\_\_\_\_  
Name of Parent/Guardian

\_\_\_\_\_  
Date



## REGISTRATION REQUIREMENTS - REFUND & CANCELLATION POLICY

### Registration Requirements

In order to enroll in a junior program we need to receive a completed junior program application and a deposit which will be applied to the overall cost of the program.

The deposit amount is determined by the date of enrollment (see deposit requirement below).

### Release Forms/Student & Parent Agreement

Release forms and other applicable waiver documents must be completed and sent at the time of enrollment. Please contact the Junior Programs Director ([junioprograms@cisl.edu](mailto:junioprograms@cisl.edu)) for a list of the documents applicable to your program.

### Program Fees

No documentation will be issued until we receive the program deposit. Students will not be permitted to start the program unless full payment has been received. Full payment will need to be paid 30 days prior to arrival date.

### Deposit/Payment

90 days or more prior to the student's arrival:

25% deposit required

61-89 days prior to the student's arrival:

50% deposit required

31-60 days prior to the student's arrival:

75% deposit required

0-30 days prior to the student's arrival:

100% payment required

### Cancellations & Refunds

The parent/guardian/representative must inform CISL in writing of the student's cancellation. Cancellation fees are charged as follows:

90 days or more prior to the student's arrival:

full refund of deposit paid, minus \$300

61-89 days prior to the student's arrival:

75% refund of deposit paid, minus \$300

31-60 days prior to the student's arrival:

50% refund of deposit paid, minus \$300

0-30 days prior to the student's arrival: no refund

### Payment of Refunds

Refunds will be paid within 30 calendar days of the request. We can only pay refunds to the person or company from whom the funds originated.

### Changes to Enrollments

We reserve the right to charge an administration fee of \$100 each time program details are changed after confirmation documents have been issued.

