



**SHERIDAN
ACADEMY**

4948 Kootenai Suite 201 Boise, Idaho 83705
(208) 331-2044 Office (208) 331-7724 Fax
Email address: Sheridan.academy@gmail.org

International Student & Parent Information

Today's Date: _____

Student's Name: _____

Date of Birth: _____ Age: _____ Grade Level: _____

Birthplace: _____

Father's Name: _____ Occupation: _____

Home Address: _____ Country _____

Home Phone: _____ Work Phone: _____

Cellular: _____ E-Mail: _____

Other: _____

Mother's Name: _____ Occupation: _____

Home Address: _____

Home Phone: _____ Work Phone: _____

Cellular: _____ E-Mail: _____

Other: _____

With whom do you live? _____

Address and phone if different than above: _____

Do you have family in the United States? Name: _____

Address: _____ Telephone: _____

Brothers (Names and ages) _____ Sisters _____

In case of emergency, contact: _____ Phone: _____

Doctor's Name: _____ Phone: _____

Allergies: _____

Medications (Past/Present): _____



Glasses? _____ Hearing Aide? _____

Past Surgeries: _____

Has the student had normal growth and developmental milestones? Please explain.

How do you interact with your father? _____

With mother? _____

With brothers/sisters? _____

Student Interests/Hobbies: _____

What chores do you do at home? _____

How much time do you spend doing homework each night? _____

Do you have a curfew? _____ What time? _____

What languages do you speak? _____

How many years of English study? _____

Does the student smoke? _____

Are you comfortable around dogs? Cats? _____

Are you comfortable around young children? _____

Do you have allergies? _____

Are there any dietary restrictions? _____

What musical training do you have? _____

What sports do you play? _____

What do you hope to learn while at Sheridan Academy? _____

Do you attend church? _____



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SLEP Score? _____ TOEFL Score? _____ Other? _____

Do you seek a regular HIGH SCHOOL DIPLOMA from Sheridan Academy? _____

What will you do AFTER attending Sheridan Academy? (junior college in America?, University?
Return to home country? Travel?) _____

Most cellular phones from Asia will not work in the United States. Please provide the telephone
LAND LINE number so that we can call your home when you arrive in Boise, Idaho.

Please attach a photo to this application and return to the school.

Please attach an official academic transcript TRANSLATED IN ENGLISH.

Please attach an official immunization/certificate of health record.

Please attach a copy of your health insurance card.

Please attach a student essay telling why you want to come to America.

The above information is confidential and will be seen only by qualified staff.

Signed: _____ Date: _____



Rules and Regulations

The Sheridan Academy is an accredited private school providing a safe and nurturing environment in which students will develop their personal, academic, and social needs. In order to maintain this atmosphere and foster positive growth, the following has been incorporated into our school:

- The Sheridan Academy has the right to determine the severity of any misconduct and deem it “not acceptable behavior” and may therefore suspend a student, generate a Behavioral Contract, expel a student, or any combination of the above.
- All students enrolled at the Sheridan Academy or the Sheridan Learning Center will be held accountable to know and adhere to the “No Tolerance” Rules and Regulations and related consequences for violation of the below standards.

Attendance:

Students must be present for 90% of scheduled classes. Students with attendance less than 90% for enrolled classes may not receive credit for that class.

Students must be in their assigned seat with all necessary materials at the start of class. Five tardies to a class equal one absence.

Students in violation of the below policies may receive:

- A verbal warning of the infraction,
- A telephone call/letter to parent or guardian,
- Suspension,
- Expulsion

ANY STUDENT COULD FACE EXPULSION FOR THE FOLLOWING:

1. Willfully causing destruction of, or defacing any school property at the Sheridan Academy or in the surrounding neighborhood.
2. Bringing or concealing any type of weapon (e.g., knife, firearm, razor, stun gun, aerosol can, etc.) on their person, their property (including automobiles), or the property of a friend/guest.
3. Trafficking, concealing, carrying any type of prescription, over-the-counter, or illegal drugs (including tobacco).
4. Qualified staff will distribute over-the-counter and prescribed medicine only.
5. The Sheridan Academy will prosecute drug possession, trafficking, and usage to the fullest extent of the law.
6. Causing injury to another student or staff member on school property or in the surrounding neighborhood.
7. Being insubordinate to a staff member.
8. Leaving school property or school functions without permission from a staff member.



9. Touching, hitting, pushing, taunting, etc., another student or staff member.
10. The Sheridan Academy has a "NO TOUCH" policy.
11. Using profanity directed towards a student or staff member in an abusive manner.
12. Damaging (to include "tagging" or graffiti) to any school property (the student or parent/guardian is responsible for appropriate compensation for the damaged property within one week of the incident).
13. Willfully not participating in the school academic or social programs.
14. Lying to a staff member.
15. Attending any school activity under the influence of illegal or non-prescribed drugs or alcohol.
16. "Borrowing" or taking any property not belonging to a student (food, school materials, etc.).
17. Cheating on assignments, helping another student cheat, plagiarism.
18. Carrying a cellular phone, pager, gaming device, or personal stereo.
19. Carrying any item that would not pass through airport security (pen knives, scissors, nail clippers, etc).
20. No gum is allowed at school.
21. Downloading or viewing inappropriate material on the Internet.
22. Drinking alcohol or using illegal drugs is prohibited.
23. Driving automobiles is prohibited.
24. Hitchhiking is prohibited.
25. Students must comply with all HOST FAMILY rules (chores, curfew, etc.).
26. Students must maintain a "C" average in all classes. School attendance is mandatory.
27. Students are under the jurisdiction of local, state and federal laws.

Violation of the above conditions may result in immediate termination from Sheridan Academy's International Program. The student and parents are responsible for all costs related to the student's immediate removal of the program and flight to country of origin.

Dress Code

28. Clothes must be sized to fit.
29. Clothes must be clean and whole, no holes.
30. Shirts are polo-style and hunter green in color and tucked into pants. Go to www.landsend.com school code is 900116112
31. Pants, capris, shorts are khaki in color and appropriate length-no cargo pants/shorts.
32. Shoes must be closed toes, no plastic slides or flip-flops.
33. Belts are simple and appropriate length- no studs.
34. Pants are to be worn at the waist-no sagging.

Any student not dressed appropriately (as per Director's discretion) will be assessed a \$2.00 penalty per day.

I have read and agree to the above terms and conditions.

Signed (student) _____ **Date** _____

Signed (parent) _____ **Date** _____



Liability and Medical Releases

Student participation on field trips will depend on previous academic and social performance.

This section is to be read and signed by the student and the student's natural parents or legal guardian.

Liability Release

I hereby release Sheridan Academy, all its employees, its international partner organizations and all their employees and field representatives, and all the family/families with whom the student will live from all liability, injury, damages or claims that I have incurred after the termination of the program. I understand that I will not be covered by any insurance policy after the program has been terminated.

The undersigned, as a student of the **Sheridan Academy International Program**, and the parents/legal guardians of the student, renounce any claim against Sheridan Academy, all its employees, its international partner organization and all their employees and field representatives, teachers, counselors, persons intervening in the program, that might arise due to injury, damage, sickness, accident, delay, unusual circumstances or expenses due to strikes, war, atmospheric conditions, quarantine, government restrictions or regulations, or those derived from acts of omission of airlines, shipping companies, railroads, buses, transportation in general, hotels, restaurants or any other services given by companies, individuals or anyone related with the aforementioned.

We understand that the student will be subject to the rules of the program, host family, school, teachers, and community where he/she will live. We also understand that Sheridan Academy and its international partner organization reserve the right to terminate any student who participates in the program whose conduct may be considered detrimental or incompatible with the interests and security of the program. If this decision is ever taken, the student and his/her parents/legal guardian will have no rights to refunds.

We accept the right of the **Sheridan Academy International Program** to directly or indirectly change, cancel and substitute in emergencies or whenever normal circumstances change, those parts of the program whose alteration may be considered necessary.



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We grant Sheridan Academy and its international partner organizations permission to use in the future any photographic or any other type of material in which the student may appear, for promotion or publicity of Sheridan Academy or its international partner organization.

The student agrees to maintain friendly and respectful relations with teachers, classmates and all family members, and to accept and follow rules and conduct imposed by said family and to participate in the family life as much as possible.

This authorization shall be made valid for the entire conduct of the **Sheridan Academy International Program** school year in which the above-noted student is participating.

No additional comments may be made to this release.

Parents' Signatures: _____ Date: _____

Student's Signature: _____ Date: _____

Medical Release

We grant Sheridan Academy, all its employees, its international partner organizations and their employees, and the family/families with whom the student will live permission to place our son/daughter in a hospital or other institution for any type of assistance or medical treatment necessary. If there is not a hospital available or appropriate, our son/daughter may be placed under the care of a local medical doctor for treatment. In case of expenses exceeding the coverage of the insurance policy covering the student, we agree to assume all costs necessary in the treatment of our son/daughter.

We also grant the above-stated individuals to act on our son/daughter's behalf in anything pertaining to possible representation with local authorities.

This authorization shall be made valid for the entire conduct of the **Sheridan Academy International Program** school year in which the above-noted student is participating.

No additional comments may be made to this release.

Parents' Signature: _____ Date: _____