

OXBRIDGE ACADEMIC PROGRAMS

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INSTRUCTIONS:

1. Fill out this application form (please PRINT or TYPE) and mail it to us with your deposit check for **\$1050 US** (or **\$1175 US** with Medical Emergency Cancellation Insurance) payable to **Oxbridge Academic Programs**.
2. Include a current transcript or a copy of your most recent report card. (An unofficial photocopy is acceptable.)
3. On a separate sheet, type a personal statement of at least 500 words. Please read Section V of this Application Form for further instructions.

I am applying for:

La Academia de España *or* **La Escuela Preparatoria de Barcelona**

I. STUDENT INFORMATION

NAME				First		Middle		Last		<input type="checkbox"/> Male <input type="checkbox"/> Female	
HOME ADDRESS				CITY		STATE/PROVINCE		ZIP/POSTAL CODE		COUNTRY	
TELEPHONE				STUDENT E-MAIL (PLEASE PRINT IN CAPITALS)				DATE OF BIRTH		CITIZENSHIP	
FATHER'S TITLE				FATHER'S NAME				PROFESSION		E-MAIL (PLEASE PRINT IN CAPITALS)	
FATHER'S ADDRESS, IF DIFFERENT FROM YOURS				HOME TELEPHONE		WORK TELEPHONE		CELL			
MOTHER'S TITLE				MOTHER'S NAME				PROFESSION		E-MAIL (PLEASE PRINT IN CAPITALS)	
MOTHER'S ADDRESS, IF DIFFERENT FROM YOURS				HOME TELEPHONE		WORK TELEPHONE		CELL			
EMERGENCY CONTACT (OTHER THAN PARENT/S)				RELATIONSHIP				TELEPHONE NUMBER			

PLEASE LIST YOUR SIBLINGS AND THEIR CURRENT GRADE IN SCHOOL

Have you ever attended one of our programs before? Yes No

If yes, please give program(s) and year attended: _____

II. ACADEMIC INFORMATION

CURRENT SCHOOL				CURRENT GRADE LEVEL		SCHOOL TELEPHONE					
SCHOOL ADDRESS				CITY		STATE/PROVINCE		ZIP/POSTAL CODE		COUNTRY	

Have you ever been suspended or dismissed from school? Yes No If yes, please explain on a separate sheet of paper.

Name and telephone number of a teacher or counselor from your school who can speak knowledgeably about you. (Although not required, a letter of recommendation is welcome.)

TITLE				NAME OF TEACHER OR COUNSELOR		SUBJECT		EMAIL (PLEASE PRINT IN CAPITALS)		TELEPHONE NUMBER	
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III. COURSE SELECTIONS

Major Course

1st Choice _____ 2nd Choice _____ 3rd Choice _____

Minor Course

1st Choice _____ 2nd Choice _____ 3rd Choice _____

IV. LANGUAGE

Knowledge of Spanish is *not* required to participate. However, students who wish to take a language class must fill out the following:

- I have never studied Spanish.
- I have studied Spanish for ___ years or speak it at home.
- All students taking a language course are welcome (but not obligated) to submit a short comment from a Spanish teacher attesting to their language level.
- Students taking an immersion course are asked to submit a writing sample in Spanish as well as a comment from their Spanish teacher.

V. PERSONAL STATEMENT

Please include a personal statement of at least 500 words about why you are applying, why you are choosing your Major and Minor courses, and what you feel you can contribute to the program. Also include your name, city, and state on the top right-hand corner and enclose *three copies* of your personal statement with your application. Feel free to write about your academic and extracurricular interests, and anything else that will help us to get to know you.

VI. FOR OUR RECORDS

How did you hear about **Oxbridge Academic Programs**? (please tick *all* that apply)

- | | |
|--|--|
| <input type="checkbox"/> Former Student – Name? _____ | <input type="checkbox"/> Poster – Where? _____ |
| <input type="checkbox"/> Teacher/Counselor – Name? _____ | <input type="checkbox"/> Newspaper Ad – Where? _____ |
| <input type="checkbox"/> School Visit? – When? _____ | <input type="checkbox"/> Website – Which? _____ |
| <input type="checkbox"/> Open-house reception – When? Where? _____ | <input type="checkbox"/> PSAT email – from Whom? _____ |
| <input type="checkbox"/> Brochure in the mail? – When? _____ | <input type="checkbox"/> Other – Please specify _____ |

VII. SHARING INFORMATION

I permit **Oxbridge Academic Programs** to share my travel details and contact information solely with other program participants.
 Yes No

VIII. ROOM REQUEST

I would like to be housed in the Spanish-speaking part of the residence.

IX. SIGNATURES

My parent/s and I have read and understood the information provided in the Student Life and Fees & Details sections of this brochure. I attest that all the information I have provided here is accurate and truthful.

STUDENT SIGNATURE

DATE

PARENT SIGNATURE

DATE

X. REMINDERS

A. Applications will only be considered once complete. Please check the following to indicate completion and inclusion in your submitted application.

- | | | |
|---|--|---|
| <input type="checkbox"/> Application Form | <input type="checkbox"/> Transcript | <input type="checkbox"/> Personal Statement (<i>3 copies</i>) |
| <input type="checkbox"/> Deposit Check | <input type="checkbox"/> Language Course materials (see Sec. IV) | |

B. Please ensure that your deposit check is made payable to: **Oxbridge Academic Programs.**