

**LANCASTER MENNONITE SCHOOL
ADDITIONAL INFORMATION FORM - INTERNATIONAL STUDENTS**

This information form must be completed and returned with the application and \$95 application fee.
Application cannot be processed without the information on this form.

Name of Student Applying _____ Grade to be entered _____

Name of Sponsor _____ Phone Number (____) _____

Address of Sponsor _____

If sponsor does not live in the US, please give the name of a US contact person who will take care of your student in case of emergency. No student will be accepted without someone in the US to be responsible for him/her.

Name of US Contact Person _____

Address of US Contact Person _____

US Contact Person's Home Phone (____) _____ US Contact Person's Office Phone (____) _____ **Check at least one (or more) in each numbered category:**

1. My child has studied/is studying in a school where all classes are taught in English.
 Enclosed are the results of the TOEFL test since my child is not in an English language school.
International students studying in a school where classes are not taught in English may be required to take some ESL classes (English as a Second Language) at an added fee. Students may be exempted from this if they submit results of a TOEFL test with a score of 550 or better.
2. Enclosed are the records of each year of secondary school completed.
(Translated into English...**and including the school seal.**)
 I understand that I must send the records of the current year as soon as they are available
(Translated into English...**and including the school seal.**)
 I have completed the information requested by LMH on the back of this page. **(Over---->)**
3. My child is covered by medical insurance. I have enclosed information requested on Emergency Information Sheet.
 My child is not covered by medical insurance in case an illness would require hospitalization; however, I promise to have the sponsor arrange for coverage and supply the school with the medical insurance information.
4. I have a relative or friend in the Lancaster area that is arranging the host family.
 I need help to find a host family. I understand the cost is additional (in the range of \$700-800 per semester) and the agreement/fee is arranged by me (or my US Contact person) and the host family.
5. **NOTICE: Pennsylvania state law will not allow a student to be admitted to any school in Pennsylvania without the required immunizations (see Health Form 1 in application packet). Please have your physician enter all exact dates of immunizations and attach his official seal. Health Form 2 is due on or before arrival at LMH.**
 My child has received all immunizations required and we have enclosed a documented copy of immunizations as outlined on Health Form 1.
 We are not able to obtain certain immunizations in our country but will arrange with someone in the US to have them completed before arrival to LMH.
 I understand that if my child plans to participate in competitive sports, we will wait to have Health Form 2 completed until after June 1 and brought to the school when he/she arrives.

Parent's or Guardian's Signature _____

SECONDARY SCHOOL(S) ATTENDED
Information Required for Student's File

Student Name

Grade 9 **Date began** _____ **Date ended**

Name of School
Address of School

School Phone Number

School Fax Number

School E-mail

Grade 10 **Date began** _____ **Date ended**

Name of School _____ Address of School

School Phone Number

School Fax Number

School E-mail

Grade 11 **Date began** _____ **Date ended**

Name of School _____ Address of School

School Phone Number

School Fax Number

School E-mail