



World Literacy Crusade, International

3209 N. Alameda St. Suite B • Compton, Ca. 90222 U.S.A. • www.worldliteracy.org • TEL (310) 537-2273

APPLICATION FOR ADMISSION 2009-10

FAX (310) 537-2139

With this form you must submit a photo of yourself and clear and legible photocopies of all educational documents. These will not be returned. Documents not in English must be accompanied by certified, literal, word-for-word translations.

APPLICANT INFORMATION

Applicant's name _____
First Middle Last

Preferred Name _____ Male Female

Date of proposed entrance _____ Applying for grade _____ Boarding Day (You must check one)

INTERNATIONAL STUDENTS: If you are planning to attend WLC as a special semester or one-year, non degree candidate, check here.

Have you applied to World Literacy Crusade School before? No Yes _____
Year

Have you ever attended WLC Summer Session? No Yes _____
Year

Mailing address _____
Street City State

Country Zip Code Telephone ()

How long have you lived at this address? _____

Student e-mail _____

Date of birth _____ Country of birth _____

Country of passport or citizenship (If dual citizen, please indicate.) _____

Do you have an Alien Registration Card (green card)? Yes No _____ Language of the home _____ Present school _____

Present grade _____ Address of school _____

FAMILY INFORMATION

Parent 1 Dr. Mr. Mrs. Ms. _____ Attended: High school
Name Boarding school College
 Graduate school

Home address _____
(If different from student's) Daytime Telephone Work Cell

APPLICANT'S NAME _____

Parent's e-mail _____

Occupation _____
(If deceased, give year of death) Title Name of Business

Parent 2 Dr. Mr. Mrs. Ms. _____ Attended: High school
Name Boarding school College
 Graduate school

Home address _____
(If different from student's) Daytime Telephone Work Cell

Parent's e-mail _____

Occupation _____
(If deceased, give year of death) Title Name of Business

With whom do you live?

Please check any that apply: Parents are married and living together Parents are divorced
 Parents are separated Single parent
 Father is remarried _____ Mother is remarried _____
Name of Stepparent Name of Stepparent

Preferred fax number _____ Name fax listed under _____

Guardian

Name _____ Relationship to applicant _____

Home address _____
Include Zip Code () Daytime Telephone Work Cell

FOR US CITIZENS ONLY (OPTIONAL):

To maintain our diverse student body and support affirmative action, we have included the following optional question: How would you describe yourself?

African American/Black White/Caucasian Asian American Hispanic _____
Please Specify
 Biracial/Multiracial American Indian/Alaskan Native _____
Please Specify
 Other _____
Please Specify

Testing

From which standardized test will you submit results?

If you are unable to submit the results of the SSAT, ISEE, PSAT, SAT, or ACT, please tell us, why, so the admission office can help you arrange the necessary testing.

SSAT _____ ISEE _____
DATE OF TESTING DATE OF TESTING
 PSAT _____ SAT _____
DATE OF TESTING DATE OF TESTING
 ACT _____ TOEFL _____
DATE OF TESTING DATE OF TESTING

FOR ALL APPLICANTS (REQUIRED): Please answer the following questions.

Is English your first language? Yes No

Has English been the primary language of instruction for your most recent three years of schooling?
 Yes No

If no, you are required to take the TOEFL **and** the Test of Writing Ability (TWA) or submit the writing sample administered as part of the SSAT.

Do you have any dietary restrictions? Yes No If so, what? _____

Do you have any allergies? Yes No If so, what? _____

FINANCIAL AID, (US Citizens only)

Financial aid applicant? Yes No

I certify that the information presented in my application is accurate, complete, and honestly presented. I also certify that, to the best of my knowledge, any information submitted on my behalf, including letters of recommendation, is authentic. I understand and agree that any intentionally inaccurate information, misleading information, or omission will, if discovered at a later date, be cause for rescission of any offer of admission or dismissal from the school.

SIGNATURES

Student _____ Date _____

Mother or guardian _____ Date _____

Father or guardian _____ Date _____

A nonrefundable application fee of \$75 for US citizens and \$125 for non-US citizens must accompany this application. Online application fees are \$50 and \$100, respectively. Check must be direct deposited in tuition account payable to our management company:

American Health and Education Clinics.

We are unable to accept international postal money orders.

World Literacy Crusade does not discriminate on the basis of gender, race, creed, ethnic or national origin, religion, disability, age, or sexual orientation in the administration of its admission and other educational policies, and athletic and other school-administered programs.

If we may be of any assistance to you, please call or write us:
Office of Admission
World Literacy Crusade, International
3209 N. Alameda Street
Suite B
Compton, CA 90222
310-537-2273
Fax 310-537-2139
E-mail info@worldliteracy.org
www.worldliteracy.org