



SCHOOL ACCEPTANCE

To Admissions Office,

We would like to take this opportunity to thank you for acceptance of our international exchange student to enroll for academic matriculation in your high school:

School year: August, _____ to _____, _____

Student Name

Nationality

Grade level

High School Name

Website

Admissions Director Signature

Print name

Date Signed

School Telephone Number

School Fax

High School Address (City, State, Zip)

Required Date of Arrival to School: _____

Upon receipt of the I-20 and an invoice for tuition and application fees, The Zource will immediately send a check to you if required to secure the acceptance for enrollment. The Zource is also interested in tuition insurance, if offered. Please be aware that all other fees, uniform costs (if any), sports participation fees and books will be billed directly to the student and natural parents. The Zource will acquire full medical insurance for each student.

Your International Representative (IR) will work closely with you to recruit, interview and screen a host family in your school's community for this student. The IR will stay connected with the school, student and host family throughout the year and will do monthly progress reports that will be sent to the natural parents through our overseas partner. The Zource relies on the school to help provide any academic or disciplinary reports to the natural parents and our overseas partners. Please call us immediately if any issue(s) arise during the school year.

On behalf of this student, and the student's natural family, we respectfully request that you sign this form to indicate that your school will admit the above student. Please return this signed form to The Zource International Representative. On behalf of all of us who are working to benefit international and U.S. youth through exchange programs, thank you for your cooperation.

Sincerely,

International Representative Name

Address

Phone

Email address