

APPLICATION FOR ADMISSION

Summer Study at The Sorbonne

- CHECK ONE:** Five-Week College Credit Program (July 5* - August 6, 2010)
 Five-Week Enrichment Program (July 5* - August 6, 2010)
 Three-Week Enrichment Program (July 5* - July 25, 2010)
* Date of departure from the US with next day arrival in Paris

STUDENT PROFILE:

Student's Name: Last: _____ First: _____ Present Grade: _____

Home Address: Street: _____ City: _____

State: _____ Zip: _____ Country: _____ Nationality: _____

Place of Birth: _____ Male Female Date of Birth: _____ Age as of July 2010: Years: _____ Mo.: _____

Parent(s) Home Phone: Cell Home () _____ Student Phone: Cell Home () _____

E-mail Addresses: Student: _____ Parent(s): _____

Mother's Full Name: Ms. Mrs. Dr. _____ Cell Bus. Ph.: () _____

Father's Full Name: Mr. Dr. _____ Cell Bus. Ph.: () _____

Secondary/High School Name: _____

School Address: Street: _____ City: _____ State: _____ Zip: _____

Name of Guidance Counselor/College Advisor: _____ School Phone: () _____

CURRICULUM CHOICE & COURSE SELECTION WILL BE MADE IN THE SPRING:

- REQUESTED OPTIONS:** Air Transportation Transfers (\$45 each way)
- Kaplan SAT Prep course: Verbal & Math (\$695, regularly \$1,095 if taken in your home city)
- London Weekend (\$795, only in 5 week program) *Note: Selected Options Can Be Changed Before May 1st.*

How Did You Learn About **Summer Study In Paris**? _____

What Did You Do Last Summer? _____

Name of Camp/Tour/Program (if any) _____

TRAVEL/ACTIVITY PERMISSION: I hereby give (Student's Name) _____ permission to participate in all planned weekend travel excursions and to take part in all other activities as scheduled by the directors of **Summer Study In Paris at THE SORBONNE**.

Date _____ Signature of Parent or Guardian _____

TRANSCRIPT RELEASE: I (Student's Name) _____ grant permission to my high school/ guidance counselor to mail or fax my current school transcript/test scores to **Summer Study In Paris at THE SORBONNE** to complete my *Application for Admission*.

Date _____ Signature of Student _____

Date _____ Signature of Parent or Guardian _____

DEPOSIT INFORMATION: A \$95 non-refundable application fee, payable to **Summer Study Programs**, must accompany this completed application. Applications received without the \$95 application fee cannot be processed. As the parent or guardian, I understand the **Summer Study** program and have discussed with my son/daughter that he/she will be required to follow all established rules including, but not limited to a nightly curfew and no use of any drug (unless prescription) or alcohol. **Summer Study** reserves the right to dismiss students, without refund, who are unable to abide by all program rules. It will be the responsibility of the parent/guardian to pay for any additional airfare incurred if their son/daughter is dismissed from the program. I/we have read the brochure and understand the costs, payment schedule, rules and refund policy and agree to same.

Date _____ Signature of Student _____

Date _____ Signature of Parent or Guardian _____

REMINDER: ENROLLMENT IS LIMITED and applications are reviewed on a "rolling admissions" basis. We recommend you **APPLY EARLY!** Do not wait for your transcript or recommendation form, which can be sent/faxed later.

PLEASE MAIL APPLICATION AND \$95 FEE TO:	Summer Study In Paris at The Sorbonne 900 Walt Whitman Road, Melville, NY 11747 (631) 424-1000 Worldwide • (800) 666-2556 Nationwide • Fax (631) 424-0567
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The following friends/relatives might like information about the **Summer Study In Paris** program. Please send your brochure to:

Name/Address/Phone: _____

Name/Address/Phone: _____

Name/Address/Phone: _____

Summer Study Programs, Inc. reserves the right to limit enrollment or cancel any class offered in the **Summer Study In Paris** program due to overwhelming or insufficient enrollment. Summer Study Programs, Inc. is granted permission to use the names and photographs of program participants in publicity materials and to act *in loco parentis* for the above applicant during the period of the program. The tuition and program fees described herein are based on costs of operation, tuition fees, travel expenses, exchange rates, lodging and dining costs as of September 1, 2009 and are subject to adjustment should there be any revision of such costs prior to the start of the program.

RECOMMENDATION FORM

Guidance Counselor / College Advisor / Teacher

PART A: TO THE APPLICANT:

Please complete the following and then give this form to your guidance counselor, college advisor, principal, headmaster or teacher. The enclosed envelope, properly stamped to avoid delays in processing, should be provided to the appropriate person. Please urge your school contact to mail the completed form, together with an up-to-date transcript, to our office immediately. If your PSAT/SAT grades are available, please have your guidance counselor forward them, as well.

All Recommendation Information is Personal and Confidential

Name of Applicant: _____ Present Grade: _____

Address: Street: _____

City: _____ State: _____ Zip: _____

Parent(s) Home Phone: () _____ Student Phone: () _____

School Name: _____

Address: Street: _____

City: _____ State: _____ Zip: _____

Under the provisions of the Family Educational and Privacy Act of 1974, I waive my right to inspect this letter of recommendation. *Note: This evaluation will be reviewed exclusively by the Summer Study Admissions Committee and will be discarded after completion of the acceptance process.*

Date: _____ Applicant's Signature: _____

PART B: TO THE GUIDANCE COUNSELOR, COLLEGE ADVISOR, PRINCIPAL OR TEACHER:

This student, with parental consent, is applying for admission to **SUMMER STUDY IN PARIS at THE SORBONNE**, a pre-college enrichment program. The purpose of the program is to challenge the student academically and to ease his or her future adjustment to college life. We would appreciate your evaluation of this student's readiness to participate successfully in a pre-college environment at The Sorbonne. For additional information about this program and/or a copy of our informative brochure, please call our office at (631) 424-1000 Worldwide or (800)666-2556 Nationwide.

INSTRUCTIONS:

1. Complete the back of this recommendation form.
2. Attach an official school transcript including the most recent report card.
3. Mail this recommendation and transcript showing PSAT/SAT scores (envelope provided). If the applicant does not have PSAT/SAT scores available as of the date of application to this program, please include the most recent standardized tests (example: California Achievement Test) with the transcript.

Please mail/fax to:

Summer Study In Paris at The Sorbonne
 900 Walt Whitman Road
 Melville, NY 11747
 Fax 631-424-0567



"Paris is such a great place to be with people your own age, exploring everything together. I learned a lot, both in and out of class, and thought it was really cool how they used the whole city of Paris as our classroom!"

Wayne Smolen, Marietta, GA



RECOMMENDATION

Guidance Counselor / College Advisor / Teacher



1. I have known this student for _____ year(s). Relationship to student: _____
2. Intellectual ability and achievement (as compared to other classmates in his/her grade):
3. Character and personality (as compared to other classmates in his/her grade):

	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT (TOP 10%)	OUTSTANDING (TOP 2-3%)	NO BASIS FOR JUDGEMENT
ACADEMIC ACHIEVEMENT						
SELF-DISCIPLINE						
CREATIVE ABILITY						
THOROUGHNESS						
MOTIVATION						
EMOTIONAL MATURITY						
EASE IN SOCIAL RELATIONSHIPS						
LEADERSHIP						
SELF-CONFIDENCE						
SENSE OF HUMOR						
CONCERN FOR OTHERS						
RESPECT ACCORDED BY FACULTY						
POTENTIAL TO SUCCEED						

LETTER FROM PARENT:

Hello Mr. Cooperman:

First of all I am writing to thank you for the wonderful time my daughter Sylvana had at Paris. She really enjoyed every minute of the program and also learned a lot in her classes. The courses she took were exactly what she expected and all the daily excursions and weekend trips she enjoyed very much. I am planning to send my youngest daughter next summer so she also has the same opportunity.

Once again, Congratulations!! Your summer program is excellent and very educational.

*Regards,
Cecilia de Gomez,
Barranquilla, Colombia*

4. The main factors contributing to the respect accorded the applicant seem to be:
 - Superiority in studies
 - Interest in and concern for others
 - Leadership in activities
 - Success in athletics
 - Accomplishment in activities and interests
 - General character

5. Has this student been involved in any disciplinary action in your school?
 - Yes
 - No

6. Additional comments:

7. Overall recommendation:

- I recommend this candidate without reservation as an excellent prospect for the program
- I recommend this candidate strongly
- I recommend this candidate with reservation
- I recommend this candidate
- I feel this candidate is unsuited for the program at this time



8. Preparer's name: _____

Title: _____

Signature: _____ School phone: () _____

Date: _____

PLEASE PRINT

Paris...the most Exciting City in the World!