

Education Center of Plano, d.b.a. Willow Bend Academy
INTERNATIONAL STUDENT APPLICATION
Non-Refundable Application Fee required for issuance of Form I-20

Proposed start date for class: _____ Student applying for grade _____
 International Students meet from 8:15 a.m. - 4:00 p.m.

2220 Coit Road, Suite 500
 Plano, TX 75075
 Ph. 972-599-7882 FAX 972-612-7858

STUDENT INFORMATION

Please Print Clearly

Family Name: _____ First Name: _____ Middle Name: _____
 Passport Name: _____ Passport Number: _____
 Date of Birth ____/____/____ (mm/dd/yyyy) Gender: Male Female
 City of Birth: _____ Country of Birth: _____ Country of Citizenship: _____
 Prior School(s) attended: _____

Complete Foreign Address:

Address: _____ Address 2: _____
 (Number and Street) (Ward, District, Apt #)
 City: _____ Province: _____
 Postal Code: _____ Country: _____
 Telephone: _____ email: _____

U.S. Host Family Address:

Name: _____ email: _____
 Address: _____ City: _____ State: _____ ZIP _____
 Cell Phone: _____ Home Phone: _____

Estimated Expenses

Tuition and Fees	\$20,000
Living Expenses:	_____
Total	_____

Amount of tuition, fees and living expenses to be paid from:

Student's Personal Funds:	\$ _____
Family, Sponsor, Etc.	\$ _____

Credit Card Information (Must provide if paying Application Fee by credit card, 3% fee applied.)

Credit Card #: _____ Expiration Date: _____
 V-Code: _____ Billing Street No. ZIP _____

For Office Use:

Assigned to (teacher)

Registration Fee	\$ _____	Date Paid _____	Check # _____	Cash _____	CC _____
SEVIS I-901 Fee:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
Tuition:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
International Fee:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
Curriculum Fee:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
Technology Fee:	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
_____	\$ _____	Date Paid: _____	Check # _____	Cash _____	CC _____
Total Due:	\$ _____	Payment notes: _____			