

## Rudolf Steiner School Foreign Exchange Visitor Application Form

Rudolf Steiner School  
15 East 78<sup>th</sup> Street  
New York, NY 10075  
Phone: 212-879-1101 Fax: 212-794-1554

Student's Legal Name \_\_\_\_\_  
Last First Middle  
Birthdate \_\_\_\_\_ Birthplace \_\_\_\_\_ Citizenship \_\_\_\_\_  
M/D/YR

Preferred address for all correspondence regarding this application:

Name \_\_\_\_\_  
Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Country \_\_\_\_\_  
Email address \_\_\_\_\_  
Phone Number \_\_\_\_\_ Mobile Phone Number \_\_\_\_\_

Please provide the following information even if the student's biological parents may be separated, divorced, deceased, or the child may be living with the legal guardian:

Father's Name _____	Mother's Name _____
Home Address _____	Home Address _____
City, State, Zip _____	City, State, Zip _____
Email address _____	Email address _____
Phone Number _____	Phone Number _____
Mobile Number _____	Mobile Number _____
Occupation/Employer _____	Occupation/Employer _____
Bus. Address/Phone _____	Business Address/Phone _____

Marital status of parent(s): Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Widowed \_\_\_\_\_ Unmarried \_\_\_\_\_  
With whom does the applicant live? \_\_\_\_\_

I/we understand and accept our role and expectations of the exchange student and student's family during his/her stay at the Rudolf Steiner School. We agree to continue to pay school fees at our son/daughter's home school and agree to accommodate the exchange of our son/daughter free of charge.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_  
Student's Family Signature \_\_\_\_\_ Date \_\_\_\_\_

**Rudolf Steiner School Foreign Exchange Health Verification Form**

Please provide the following health care information:

International Health Care Provider:

\_\_\_\_\_

Emergency Contact Information:

\_\_\_\_\_

Any additional medical information needed for visit:

\_\_\_\_\_

**Any medical expenses incurred by the visiting student will be the responsibility of the visiting family. Please be sure to arrange for your own international coverage.**

I/we understand and accept our role and expectations of the exchange student and student's family during his/her stay at the Rudolf Steiner School. We understand medical coverage is our responsibility during the duration of the foreign exchange.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Student's Family Signature \_\_\_\_\_

Date \_\_\_\_\_

**Rudolf Steiner School Foreign Exchange Health Verification Form**

Please provide the following health care information:

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I/we understand and accept our role and expectations of the exchange student and student's family during his/her stay at the Rudolf Steiner School. We understand medical coverage is our responsibility during the duration of the foreign exchange.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Student's Family Signature \_\_\_\_\_

Date \_\_\_\_\_

## **Foreign Exchange Visitor Guidelines**

The Rudolf Steiner High School offers placement of a foreign language exchange student for the tenth grade. The program allows mature and motivated students to learn and live in a foreign country for up to four months. Foreign exchanges will foster competence and fluency in English and offers an immersion in a different cultural environment.

### **Host Country Possibilities**

The School maintains relationships with Waldorf Schools in Germany, Austria, Switzerland, France, Spain, and Chile to arrange foreign exchanges.

### **Application Guidelines**

#### **How to Apply:**

There is a formal application process that includes written statements and agreements for both students and parents.

#### **Qualifications for Students**

- 10th grade students
- Basic English skills required
- Good standing in all aspects of school life.
- Ability to be away from home for an extended period of time.

#### **Financial Responsibilities**

##### **Tuition:**

- The tuition is exchanged with the host School.

##### **Other Expenses:**

- Arrange and finance air fare and all other travel expenses.
- Provide spending money so the students can participate in social life and cover personal expenses while away. Debit cards are recommended.

##### **Spending Money:**

- Parents should provide adequate spending money for their child. Debit cards are best for this purpose. The monthly amount can be estimated with the help of the foreign exchange student's family.

#### **Travel Documents and Insurance**

##### **Health and Travel Insurance**

- Students must have a valid passport
- Valid Visa
- Arrange for proper health insurance coverage while away (mandatory)
- Purchase travel insurance that would cover various kinds of expenses in case of illness and other emergencies. (mandatory)

**Foreign Language teachers will help facilitate all that is needed for the student to go to the foreign country, including host family communications.**

#### **Application Checklist**

- A passport photo
- Rudolf Steiner School Foreign Exchange Visitor Application Form
- A letter of recommendation from your language teacher
- International Health Insurance verification
- A copy of your latest school report
- Information for travel documents form

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1. Please submit a recommendation letter from you language teacher and send to:  
foreignexchange@steiner.edu.

2. Include a photograph of student. Please send to the foreign exchange email: foreignexchange@steiner.edu.

Name of Teacher \_\_\_\_\_ Date \_\_\_\_\_

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