

Flushing Christian School

41-54 Murray Street, Flushing, NY 11355 Phone: (718) 445-3533 • Fax: (718) 445-7546

All admissions applicants from foreign countries must submit this form.

A CERTIFICATE OF ELIGIBILITY
I-20 will not be authorized until this form is completed and returned to Flushing Christian
School. We will attach this form to your

School. We will attach this form to your Certificate of Eligibility. Both the form and certificate must be shown to the U.S. Consult to obtain a visa.

RETURN TO:

Flushing Christian School – Admissions 41-54 Murray Street, Flushing, NY 11355

Declaration of Finances *Confidential*

Email:	nds: e student's average of	State		
City Current Phone: Email: Student Sources of Fur This school estimates the a. Tuition Applicate Registrate General I Uniform	nds: e student's average of	State Applying for Grade: costs for an academic term GRADES K-5 \$ 9,500.00 \$ 375.00	Zip Home Country Permanent Phone: Date of Birth of 10 months to be: GRADES 6-8 \$ 10,000.00	
Current Phone: Email: Student Sources of Fur This school estimates the a. Tuition Applicate Registrat General I Uniform	nds: e student's average of ion Fee	Costs for an academic term GRADES K-5 \$ 9,500.00 \$ 375.00	Permanent Phone: Date of Birth of 10 months to be: GRADES 6-8 \$ 10,000.00	
Email:	nds: e student's average of ion Fee	GRADES K-5 \$ 9,500.00 \$ 375.00	Date of Birth of 10 months to be: GRADES 6-8 \$ 10,000.00	
Student Sources of Fur This school estimates the a. Tuition Applicati Registrat General I Uniform	nds: e student's average of tion Fee tion	GRADES K-5 \$ 9,500.00 \$ 375.00	of 10 months to be: GRADES 6-8 \$ 10,000.00	
a. Tuition Applicati Registrat General I Uniform	e student's average of ion Fee ion	GRADES K-5 \$ 9,500.00 \$ 375.00	GRADES 6-8 \$ 10,000.00	
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Applicati Registrat General I Uniform	ion	\$ 9,500.00 \$ 375.00	\$ 10,000.00	
b. Living Ec. Other (sp	Total pring (If Necessary) expenses:	\$ 350.00 \$ 200.00 \$ 10,575.00 \$ 5,000.00 \$		
EX	PENSE TOTAL	\$	(this total must be lower that the income total	al)
Amount due at the tim	e of application:	GRADES K-5	GRADES 6-8	
Application Fee Last Month's Tuition Deposit Total		\$ 375.00 \$ 950.00 \$1,325.00	\$ 375.00 \$ 1,000.00 \$ 1,375.00	

Enter amounts in U.S. dollars. Please PRINT all entries. Attach a copy of the bank statement in U.S. dollars

1. Personal or Family Savings Account Holder's Name: Relationship to Applicant: Name of Bank _____ 2. Parents and/or Sponsors Name of Bank Account Holder's Name: What is the total amount you expect to have when you arrive at this institution? Parent or Sponsor signature is required **TOTAL** Request for guardian if parent(s) are not in the United States: I will be responsible for all academic costs and any costs that would be needed while the student is attending our school including costs for medical emergencies. Email Address: Name: ____ _____Phone: _____ Signature **All areas listed above are required information in order for an I-20 to be issued. A copy of this information is required to be given to the consulate with your I-20 for your appointment. An appointment needs to be made to review proper paperwork before the student can attend school. Please call (718) 445-3533 to schedule a date and time.