



## COLUMBIA INDEPENDENT SCHOOL

### Application for Admission – International Students

Columbia  
Independent  
School  
www.cislions.org

Karen Shryock  
Director of Admissions  
admissions@cislions.org  
Phone 573-815-5965

Lower School (K-5)  
107 Waugh St.  
Columbia, MO 65201  
Phone 573-449-6435  
Fax 573-449-8348

Upper School (6-12)  
1200 E. Broadway  
Columbia, MO 65215  
Phone 573-815-5960  
Fax 573-815-5971

#### ADMISSION CHECKLIST

The following must be submitted to CIS:

- Form A – Application for Admission (2 pages)
- Form B – Parents’/Guardians’ Questionnaire (2 pages)
- Form C – Applicant Information (3 pages)
- Form D – Request for Copies of School Records form
- Official School Transcripts
- Form G – Statement of Financial Support
- Application Fee of \$150.00

#### TEACHER EVALUATIONS

International Student applying for 6<sup>th</sup> – 12<sup>th</sup> grade must give a teacher evaluation to their English language teacher and Math teacher. Each teacher must complete the evaluation and mail it directly to CIS.

#### ADDITIONAL REQUIREMENTS

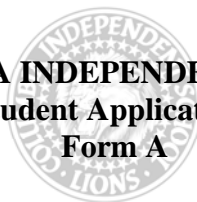
**International Students applying for 6<sup>th</sup> – 12<sup>th</sup> grade must also take the SSAT.** The student’s score must be sent directly from SSAT to CIS. The TOEFL iBT is recommended, but not required for 9<sup>th</sup> – 12<sup>th</sup> grade applicants. See the International Student Admissions section on the school website for more information.

#### Admission Policy

Columbia Independent School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. CIS does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admission policies, scholarship and loan programs, and athletic and other school-administered programs.

The selection of a school is an important decision for families. Our admissions process encourages thoughtful and mutual exploration of interests, attitudes, and philosophies. It is just as important for prospective families to become acquainted with the mission and philosophy of Columbia Independent School as it is for the Admissions Committee to become familiar with the academic and personal qualities of each student. During the admissions procedure, we learn about our applicants from the application, teacher evaluation(s), school records, interview, school visit, and testing (if applicable).

**COLUMBIA INDEPENDENT SCHOOL**  
**International Student Application for Admission**  
**Form A**



**FAMILY INFORMATION**

Name of Applicant: \_\_\_\_\_  
(as it appears on legal documents)      FIRST NAME      MIDDLE NAME      LAST/FAMILY NAME

Preferred Name: \_\_\_\_\_      Male       Female

The application is for grade: \_\_\_\_\_ for school year 20\_\_\_\_ - 20\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_      Place of Birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_      Nationality: \_\_\_\_\_

Home Address \_\_\_\_\_      Home Phone \_\_\_\_\_

City \_\_\_\_\_      Province \_\_\_\_\_      Postal Code \_\_\_\_\_      Country \_\_\_\_\_

Does this student have a valid passport?  Yes  No  
 If yes, attach a copy of the passport to the application.

Does this student have a valid visa?  Yes  No  
 If yes, what is the visa category (ex. F-2)? \_\_\_\_\_  
 Please attach a copy of the visa to the application

**Name of parent(s) or guardian(s):**

Dr.  Mr.  Mrs.  Ms.

Dr.  Mr.  Mrs.  Ms.

\_\_\_\_\_  
PARENT'S/GUARDIAN'S LEGAL NAME

\_\_\_\_\_  
PARENT'S/GUARDIAN'S LEGAL NAME

\_\_\_\_\_  
EMPLOYER/BUSINESS

\_\_\_\_\_  
EMPLOYER/BUSINESS

\_\_\_\_\_  
OCCUPATION      POSITION

\_\_\_\_\_  
OCCUPATION      POSITION

\_\_\_\_\_  
OFFICE PHONE      E-MAIL ADDRESS

\_\_\_\_\_  
OFFICE PHONE      E-MAIL ADDRESS

**Please check all that apply:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Parents married   | <input type="checkbox"/> Father remarried            | <input type="checkbox"/> Mother remarried            |
| <input type="checkbox"/> Parents separated | <input type="checkbox"/> Father deceased             | <input type="checkbox"/> Mother deceased             |
| <input type="checkbox"/> Parents divorced  | <input type="checkbox"/> Applicant lives with father | <input type="checkbox"/> Applicant lives with mother |

If the applicant does not live with both parents, please provide the name and address of the parent who does not live with the applicant:

Dr.  Mr.  Mrs.  Ms.

\_\_\_\_\_  
PARENT'S/GUARDIAN'S LEGAL NAME

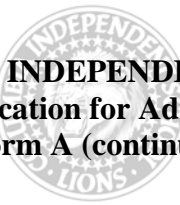
\_\_\_\_\_  
HOME PHONE NUMBER

\_\_\_\_\_  
STREET ADDRESS      CITY      PROVINCE      POSTAL CODE      COUNTRY

**Please list all of the applicant's siblings:**

| Name | Date of Birth | Grade | School Attending | Check if student does/did attend CIS |
|------|---------------|-------|------------------|--------------------------------------|
|      |               |       |                  |                                      |
|      |               |       |                  |                                      |
|      |               |       |                  |                                      |
|      |               |       |                  |                                      |

**COLUMBIA INDEPENDENT SCHOOL**  
**Application for Admission**  
**Form A (continued)**



**EDUCATION**

School now attending: \_\_\_\_\_ Current Grade: \_\_\_\_\_ Dates of Attendance: \_\_\_\_\_

\_\_\_\_\_  
 SCHOOL ADDRESS CITY PROVINCE POSTAL CODE COUNTRY

\_\_\_\_\_  
 HEAD OF SCHOOL OR PRINCIPAL SCHOOL'S PHONE NUMBER

Teacher/Counselor who best knows the applicant: \_\_\_\_\_  
 NAME POSITION

\_\_\_\_\_  
 TEACHER'S ADDRESS (IF NOT SCHOOL ADDRESS) CITY PROVINCE POSTAL CODE COUNTRY

Previous Schools Attended (If more space is necessary, you may use the back of this page):

| School | Grades | Dates of Attendance | Address |
|--------|--------|---------------------|---------|
|        |        |                     |         |
|        |        |                     |         |
|        |        |                     |         |
|        |        |                     |         |

**REFERENCES**

Please give two personal references to whom we may write and/or call for information about your son/daughter (e.g., prior classroom teacher, preschool teacher, school counselor). Please do not use your son's/daughter's current teacher as a reference.

Reference 1: \_\_\_\_\_  
 LEGAL NAME POSITION

\_\_\_\_\_  
 REFERENCE'S STREET ADDRESS CITY PROVINCE POSTAL CODE COUNTRY

\_\_\_\_\_  
 REFERENCE'S PHONE NUMBER REFERENCE'S E-MAIL ADDRESS

Reference 2: \_\_\_\_\_  
 LEGAL NAME POSITION

\_\_\_\_\_  
 REFERENCE'S ADDRESS CITY PROVINCE POSTAL CODE COUNTRY

\_\_\_\_\_  
 REFERENCE'S PHONE NUMBER REFERENCE'S E-MAIL ADDRESS

***In addition to Forms A, B, C, D, and G, an application fee of \$150.00 is required before CIS can begin the application process (checks should be written to Columbia Independent School). Form E can be given directly to the applicant's teacher(s), but the teacher(s) must mail the form directly to Columbia Independent School. Upon receipt of Forms A, B, C, D, and G, the Director of Admissions will contact you to arrange the interview. Applicants for grades 6-12 must also take the entrance exam.***

\_\_\_\_\_  
 PARENT/GUARDIAN SIGNATURE

\_\_\_\_\_  
 DATE

**All materials submitted in support of an Application for Admission become the property of Columbia Independent School. Application materials, including evaluations, school transcripts, and the results of the interview and entrance exam, are confidential and will not be released. Please contact the CIS Admissions Office for further information at (573) 815-5965.**







**COLUMBIA INDEPENDENT SCHOOL**  
**Applicant Information**  
**Form C**

**Candidates for admission are to complete the form below in their own handwriting.**

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Current School \_\_\_\_\_ Grade \_\_\_\_\_

What are your favorite subjects in school? \_\_\_\_\_

List your three favorite books read in the past year:

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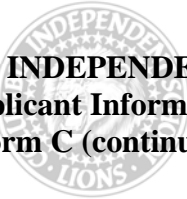
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**School Activities** – (applicant’s current/most recent school year)  
Please describe the activities in which you are involved at your school.

**Out-of-School Activities** – (applicant’s current/most recent school year)  
Please describe the activities in which you are involved outside of school.

**COLUMBIA INDEPENDENT SCHOOL**

**Applicant Information  
Form C (continued)**



- 1. Aside from improving your English skills and learning about American culture, please explain why you are interested in going to school at CIS.**

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- 2. Living away from home with a host family while learning a new language could be difficult. Explain why you think you can handle this situation.**

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- 3. Describe any travel experiences you have had outside of your own country.**

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- 4. What are your goals after you finish high school?**

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**COLUMBIA INDEPENDENT SCHOOL**  
**Request for Copies of School Records**  
**Form D**

**Parents/Guardians: Please provide this form to the applicant's current school in order to obtain the necessary records.**

Office of the Registrar at (the school's name): \_\_\_\_\_

Name of Student Applying for Admission: \_\_\_\_\_

The student named above, who is currently enrolled in your school or who recently attended your school, is a **CANDIDATE FOR ADMISSION** to Columbia Independent School for the \_\_\_\_\_ school year. We would appreciate **COPIES** of this student's grade reports, standardized test scores, teacher comments, attendance records, discipline records, and other confidential information you feel might be helpful to us in evaluating his/her academic ability and social development **FOR THE PAST THREE YEARS.**

Please note that this student is not transferring to our school at this time, and you should not take any action regarding this student's status at your school.

Karen Shryock, Director of Admissions  
Columbia Independent School, 1200 E. Broadway, Columbia, MO 65215 USA

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**For the School Official:**

**I verify that the attached/enclosed records belong to the student named above, a student at our school. Any questions regarding these documents, including their authenticity, can be directed to me.**

**Place Official  
School Stamp  
Here**

\_\_\_\_\_  
SCHOOL OFFICIAL'S SIGNATURE

\_\_\_\_\_  
SCHOOL OFFICIAL'S PRINTED NAME

\_\_\_\_\_  
DATE (MM/DD/YYYY)

\_\_\_\_\_  
SCHOOL OFFICIAL'S TITLE

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Parent of the applicant:

This portion of the form is to be completed by the parent or guardian of the applicant.

Name of student: \_\_\_\_\_

Present grade: \_\_\_\_\_ School: \_\_\_\_\_

\_\_\_\_\_  
SCHOOL ADDRESS

CITY

PROVINCE

POSTAL CODE

COUNTRY

I hereby give permission to the school I have listed above to release information to Columbia Independent School, as requested above.

\_\_\_\_\_  
PARENT'S/GUARDIAN'S SIGNATURE

\_\_\_\_\_  
DATE

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