



## SUMMER PROGRAM IN PROVENCE

### APPLICATION FOR ADMISSION

#### STUDENT INFORMATION:

Student's Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Present Grade: \_\_\_\_\_

Home Address: Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Social Security # \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age as of June 2016: Years: \_\_\_\_\_ Months: \_\_\_\_\_

Parent(s) Home Phone: \_\_\_\_\_ Student Phone: \_\_\_\_\_

Student email: \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mother's email: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Father's email: \_\_\_\_\_

Secondary/High School Name: \_\_\_\_\_

How did you learn about The Barat Foundation Summer Program? \_\_\_\_\_

**TRAVEL/ACTIVITY PERMISSION:** I hereby give (Student's Name) \_\_\_\_\_ permission to participate in all travel excursions and to take part in all other activities as scheduled by the Directors of the Barat Foundation Summer Study in Provence.

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 to The Barat Foundation to complete my Application for Admission.

Date: \_\_\_\_\_ Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Parent or Guardian: \_\_\_\_\_

**DEPOSIT INFORMATION:** A \$1,100.00 payment (\$1,000.00 deposit plus a \$100.00 non-refundable application fee), payable to **The Barat Foundation** must accompany this completed application. If for some reason the application is refused, the full payment (including \$100 application fee) will be refunded. As the parent or guardian, I understand **The Barat Foundation** study and have discussed with my child 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. **The Barat Foundation** reserves the right to dismiss students, without refund, who are unable to abide by these rules. It will be the responsibility of the parent/guardian to pay for any additional airfare and expenses incurred if their child is dismissed from the study.

Date: \_\_\_\_\_ Signature of Parent or Guardian: \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Student: \_\_\_\_\_

**REMINDER: ENROLLMENT IS LIMITED** and acceptance is reviewed on a rolling admissions basis. **WE RECOMMEND YOU APPLY EARLY!** You do not need to wait for your transcript or recommendation form, which can be mailed/faxed later.

**PLEASE MAIL TO:** **The Barat Foundation**  
Summer Program in Provence  
P.O. Box #32392  
Newark, NJ 07102

[www.baratfoundation.org](http://www.baratfoundation.org) phone: 973-534-5314 ; email: [baratfoundation@gmail.com](mailto:baratfoundation@gmail.com)

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**SUMMER PROGRAM IN PROVENCE**  
**TEACHER RECOMMENDATION PART II**

1. I have known this student for \_\_\_\_\_years(s). Relationship to student: \_\_\_\_\_
2. Please complete the following assessment regarding the Intellectual ability, achievement, and character of the applicant:

	BELOW AVERAGE	AVERAGE	GOOD	EXCELLENT (TOP 10%)	TRULY OUTSTANDING (TOP 2-3%)	NO BASIS FOR JUDGMENT
ACADEMIC ACHIEVEMENT						
SELF- DISCIPLINE						
CREATIVE ABILITY						
EMOTIONAL MATURITY						
SELF- CONFIDENCE						
CONCERN FOR OTHERS						
POTENTIAL TO SUCCEED						

4. The main factors contributing to the respect accorded the applicant seem to be: (please check)
- Superiority in studies   
  Interest in and concern for others   
  Accomplishment in activities and interests  
 Leadership in activities   
  Success in athletics   
  General character
5. Has the student been involved in any disciplinary action in your school?  Yes  No
6. If the answer to number 5 is yes, please explain the nature of the disciplinary action (Please feel free to use back of form).
7. Additional Comments (Please feel free to use back of form):

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8. Overall recommendation: (please check)
- I recommend this candidate without reservation as an excellent prospect for the program.  
 I recommend this candidate with reservation.  
 I feel this candidate is unsuited for the program at this time.
9. Preparer's Name: \_\_\_\_\_ Title: \_\_\_\_\_
- Signature: \_\_\_\_\_ Date: \_\_\_\_\_ School Phone: \_\_\_\_\_