



International Language Institute, DC (ILI) English Study Program Enrollment Form

(for students attending our Washington, DC location only)

I. STUDENT INFORMATION

Last Name: _____ First Name: _____ Middle: _____

Gender: Male Female Date of Birth: ____/____/____ (mm/dd/yy)

City & Country of Birth: _____ Country of Citizenship: _____

Native Language: _____ Years studied English: _____

Street: _____ City: _____

State: _____ Zip Code: _____ Country: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Emergency Contact: _____ Emergency Contact Phone: _____

How did you learn about ILI? Friend Family Internet Search Agent: _____ Other: _____

Are you interested in ILI's Homestay Program (living with an American family): Yes No

II. STUDY PROGRAM

Intensive Day Program (25 hours per week) TOEFL Test Prep GMAT Test Prep GRE Test Prep

2016 Start Dates: Aug 1 Aug 29 Sep 26 Oct 24 Nov 21 Dec 19 Other: _____ (mm/dd/yy)

2017 Start Dates: Jan 17 (Tuesday) Feb 13 Mar 13 Apr 10 May 8 Jun 5 Jul 3
 Jul 31 Aug 28 Sep 25 Oct 23 Nov 20 Dec 18 Other: _____ (mm/dd/yy)

➔ How many weeks or months do you plan to attend? _____ weeks or _____ months

Private English Tutorial (2 hour minimum per session) Day(s): _____

Semi-Private English Tutorial (2 hour minimum) Time: _____

Special English Group Course: _____ Length: _____

III. VISA INFORMATION

Do you currently have an F-1 Visa? Yes No

Are you requesting the I-20 form? Yes No

Please select one: Initial Attendance Transfer Change of Status Reinstatement

How do you want to receive the I-20 form? Pick-up at ILI Airmail Express Mail/Courier (\$40-100)

Number of Dependents: _____

IV. FEES, TUITION & PAYMENT POLICY* (please check for which you will pay with your application)

Application Fee for all programs: <input type="checkbox"/> \$50 (non-refundable after 72 hours)	Books: <input type="checkbox"/> \$_____
Intensive Day Program (ESL or TOEFL):	(vary by level \$50-134)
Issue of I-20 / Change of Status no charge	Homestay (only for F-1 students):
<input type="checkbox"/> SEVIS I-901 Fee paid to SEVP \$200	<input type="checkbox"/> Homestay Placement Fee \$150
<input type="checkbox"/> Express Delivery Fee \$_____ \$40-100	<input type="checkbox"/> Homestay for 4 weeks (minimum) \$925
<input type="checkbox"/> Tuition for 4 weeks (1 cycle) \$780	<input type="checkbox"/> Homestay for 1 week \$235
<input type="checkbox"/> Tuition for 3 weeks \$595	<input type="checkbox"/> Homestay per day \$35
<input type="checkbox"/> Tuition for 2 weeks \$400	Private Tutorial:
<input type="checkbox"/> Tuition for 1 week \$205	<input type="checkbox"/> _____ Hours (2-hour minimum) \$42 per hour
Intensive GRE or GMAT Class:	<input type="checkbox"/> _____ Travel surcharges \$10/16
<input type="checkbox"/> Tuition for 4 weeks (1 cycle) \$850	Semi-Private Tutorial:
<input type="checkbox"/> Tuition for 3 weeks \$750	<input type="checkbox"/> _____ Hours (2-hour minimum) \$25 per student
<input type="checkbox"/> Tuition for 2 weeks \$500	Other Fees:
<input type="checkbox"/> Tuition for 1 week \$250	<input type="checkbox"/> Late payment fee \$15 per week
	<input type="checkbox"/> Returned check fee \$30
	<input type="checkbox"/> International bank wire fee \$30

* subject to change without prior notice

Payment policy: Application fee is due at time of enrollment. In order to issue an I-20 form, the application fee has to be paid. Tuition for the first cycle is due the first day of class, a late fee of \$15 per week will be charged for any tuition not received by Wednesday. Students with open balances are not allowed to re-enroll until all balances have been paid.

V. PAYMENT INFORMATION (for mailed or faxed applications only)

Cash U.S. Check Traveler Checks Credit Card Bank Wire Invoice to organization

Credit card holder's name: _____
Card number: _____ Exp. date: _____ (month/year)
Card ID number: _____ (Visa/MasterCard: 3-digit code from back of card, AmEx: 4-digits from front of card)
Billing address: _____
Please charge the following amount to my credit card \$ _____ Signature: _____

VI. MEDICAL & LIABILITY RELEASE; AFFIDAVIT OF FINANCIAL SUPPORT

I grant permission for ILI to arrange for emergency medical treatment of the Applicant during the period of enrollment and while participating in an ILI after school activity. I waive all claims against ILI and its employees for any injury, accident, or illness occurring during or by any reason of participating in an ILI activity. I accept full responsibility for all expenses of the Applicant during the period of enrollment. I certify that I have sufficient funds for this purpose.

Signature of Responsible Person _____ Date _____
Relationship to Applicant: Self Parent Guardian Other _____
Name of Responsible Person: _____
Address: _____
Phone number: _____ Email: _____

VII. REFUND POLICY

The terms and obligations described herein are legal and binding, once the student has been accepted for admission.

- The \$50.00 application fee is **non-refundable** unless enrollment is cancelled within 72 hours of signing or if ILI is unable to place the student in the appropriate level.
- Fees for reimbursable services such as SEVIS registration and express delivery are non-refundable once the service is completed.
- A full tuition refund will be given if requested before the start date of the scheduled class(es) or if a prospective student has his/her visa application rejected.
- A full tuition refund will be given if a class is cancelled by Transemantics/ILI or if a student is rejected for enrollment.
- A prorated tuition refund will be given to a student who withdraws prior to the completion of 75% of the student's scheduled class. Withdrawal notification has to be submitted by the last day of attendance. Unattended days prior to notification of withdrawal, up to 4 weeks, will count as attended classes. The prorated tuition refund shall be determined by the ratio of the number of weeks or lessons completed by the student to the total number of weeks of the student's scheduled class(es). Any portion of a week's attendance by a student shall be considered a full week's attendance for this purpose. Regardless of when a student requests early withdrawal, there is no tuition refund if a student completes 75% of scheduled classes.
- Refunds will be made by check for all cash, check or debit card payments and by credit card for all credit card payments within 30 days of receiving written notification or within 30 days of Transemantics/ILI cancellation of class(es).
- Weekly tuition credits for vacations or other planned absences are only given if notification is received in advance. There are no retroactive credits for unattended weeks and there are no credits for individual unattended days. Unused credits and prepaid classes will be forfeited six months after last attendance.
- There is no credit or refund of tuition for days on which ILI is closed because of holidays, bad weather or other emergencies.
- Once received by the student, **books and other materials** are the property of the student and are **non-refundable**.
- Private, semi-private and special group classes cancelled by the student(s) (including "no-shows") may be made up only if notice is given by the student to ILI either by phone (202) 362-2505 or by email to ili@ilidc.com **at least 24 hours prior** to the scheduled class(es) or by noon Friday for any classes scheduled on Saturday, Sunday or Monday; or if one or more classes are not held through no fault of the student. If a student fails to cancel on time, full tuition must be paid for the missed class(es). Semi-private and small group classes have to be cancelled by all students enrolled in class, cancellation of just one student is not accepted and does not release that student from paying for the missed class.

This refund policy is in accordance with the provisions of the DCMR 16, Chapter 22, of the Government of the District of Columbia rules and regulations concerning post-secondary non-degree schools.

VIII. STUDENT ACKNOWLEDGEMENT

By signing this enrollment form, I agree to all terms and conditions set forth by the International Language Institute (ILI).

SIGNATURE OF APPLICANT

DATE