

Recent

Photograph



Go Beyond Yourself

Admissions • Postal Box 2667 • Olympic Valley • California 96146
Tel 530-583-9393 • Fax 530-581-1111 • info@sva.org • www.sva.org
Established 1978 at Lake Tahoe
Fully Accredited by NIPSA, and AdvancED

Office Use Only	
Application	____/____/____
Admitted	____/____/____
Entered SVA	____/____/____
Withdraw/Grad	____/____/____

SVA STUDENT APPLICATION

Please type and submit the completed application and documents by fax, mail, or email: info@sva.org

Please send 1) this completed two-page application 2) student personal statement (see page two) 3) a transcript of school grades in your native language and translated to English for the past two years, 4) a letter of recommendation from a teacher or school official, 5) International students are required to submit a copy of a bank statement that proves the family has funds to pay for tuition, and 6) an application fee of US \$100 by written check, credit card, or bank draft. Funds may be transmitted by wire from your bank directly to the bank of SVA. No application can be considered official nor acted upon until the student's file is complete.

Student's Name _____
Family First Middle (Nickname) M F

Date of Birth _____ Present Age _____ Current grade _____ SS# _____

Applying for: School Year _____ Summer School: session 1 _____ session 2 _____ both sessions _____

Family Information

Father's name _____ Father's email _____

Mother's name _____ Mother's email _____

Family or Student E-mail _____

Family Mailing address _____ Zip or Postal Code _____

Family Day telephone (include country code) _____ Evening telephone _____

Student Cell Phone Number (include country code) _____

Family Fax (include country code) _____

Family Home address _____

_____ Zip or Postal Code _____

Occupation of Father _____ Occupation of Mother _____

How did you hear of Squaw Valley Academy? _____

International Applicants only:

Country of birth _____ Country of citizenship _____ Native language _____

English language ability or level _____ Recent TOEFL score (optional) _____

What are your plans after you leave Squaw Valley Academy? _____

Educational Agency Information, if applicable: Agency Name _____

Educational Agency Mailing Address (include postal code) _____

Phone Number (include country code) _____ Agent's Name/email _____

Have you studied in the U.S. before? _____ Name of US School attended: _____

Do you now have a visa to enter the U.S.? _____ Visa type _____ Expiration Date _____

Have you ever been issued an I-20? _____ If so, by what school? _____

When do you wish to enter Squaw Valley Academy? _____

Name, address and telephone number of U.S. contact person _____

All Student Applicants:

Name, address, and web site of school currently/most recently attended _____

Name, title, and e-mail address of school contact person _____

Main academic strengths _____

Main academic weaknesses _____

Names and ages of brothers and sisters _____

Sports and athletic experience _____

Winter sports interests _____

Favorite activities and hobbies _____

Do you plan to attend university? _____ Where? _____

Personal Statement:

On a separate sheet of paper in your own handwriting in English, write a short statement describing yourself and explaining why you wish to attend Squaw Valley Academy. If you have any discipline records, please provide a written explanation.

Application Completion:

I request enrollment for this student at Squaw Valley Academy (SVA). If the student is accepted by SVA, I agree to pay all expenses for the education and support of this student as set forth in statements presented by the School for charges incurred. I understand that the minimum period of enrollment is for one academic year or any portion remaining. This agreement is entered into under the laws of the County of Placer, State of California.

Signature of parent(s) or guardian(s) _____ Date _____

If accepted, I agree to comply with regulations and policies of the school.

Signature of student _____ Date _____

SQUAW VALLEY ACADEMY

Admissions • Squaw Valley Academy • Postal Box 2667 • Olympic Valley • California • 96146

Tel 530-583-9393 • Fax 530-581-1111 • e-mail: info@sva.org

TEACHER'S CONFIDENTIAL RECOMMENDATION

Applicant's Name _____ Grade _____
(Current Year)

The above-named student has applied for admission to Squaw Valley Academy, a coed college-preparatory boarding and day school in Squaw Valley. Your critical insight and evaluation herein will be extremely helpful as we consider his or her application. We sincerely thank you for your assistance in helping us evaluate this applicant. If you have any questions about us, please do not hesitate to telephone or to check our web page at www.sva.org

Your Name _____ Today's Date _____

Your Position _____ School _____

School Mailing Address _____

How long have you known applicant? _____ In what capacity? _____

I. Academic Traits - Please rank the applicant in comparison with other students of the same age you have known or taught in your school by placing a check mark in the appropriate position on each line.

A. Intellectual Aptitude

Low	Average	Very high
-----	---------	-----------

B. Study Habits

Low	Average	Very high
-----	---------	-----------

C. Academic Motivation

Low	Average	Very high
-----	---------	-----------

D. Intellectual Curiosity

Low	Average	Very high
-----	---------	-----------

E. Academic Imagination

Low	Average	Very high
-----	---------	-----------

II. Overall Ranking - In comparison with students of the same age, please summarize your rankings below.

As a Student _____

Weak	Fair	Average	Good	Outstanding
------	------	---------	------	-------------

As a Person _____

Weak	Fair	Average	Good	Outstanding
------	------	---------	------	-------------

III. Personal Traits - Please rank the applicant in comparison with other students of the same age you have known or taught in your school by circling the appropriate number on each line.

	Below Avg	Fair	Good	Excellent	Outstanding
A. Sense of Humor	1	2	3	4	5
B. Reaction to Criticism	1	2	3	4	5
C. Reaction to Setbacks	1	2	3	4	5
D. Self-Confidence	1	2	3	4	5
E. Concern for Others	1	2	3	4	5
F. Standards of Personal Conduct	1	2	3	4	5
G. Standard of Personal Integrity	1	2	3	4	5
H. General Emotional Stability	1	2	3	4	5
I. Self-Discipline	1	2	3	4	5
J. Initiative and Drive	1	2	3	4	5
K. General Level of Maturity	1	2	3	4	5

IV. Please tell us anything else you can about the candidate which will help us to understand him or her better as a student and as a person. Outdoor activities including winter sports are integral to our program; your comments regarding the student's general athletic ability and attitude are most helpful.

V. Has the applicant been subject to serious disciplinary or academic censure? If yes, please explain.

VI. Is s/he the kind of person you would wish to associate with your own son or daughter? Please comment.

VII. I place my recommendation for this candidate's admission to Squaw Valley Academy as follows:

With great enthusiasm _____ With confidence _____ With some confidence _____

With reservation * _____ I do not recommend* _____

* Please explain your reservation or negative recommendation:

Please return by email, fax, or mail. Thank you for your assistance.

SQUAW VALLEY ACADEMY

Admissions • Squaw Valley Academy • Postal Box 2667 • Olympic Valley • California • 96146
Tel 530-583-9393 • Fax 530-581-1111 • e-mail: info@sva.org

COUNSELOR/PRINCIPAL CONFIDENTIAL RECOMMENDATION

Applicant's Name _____ Grade _____
(Current Year)

The above-named student has applied for admission to Squaw Valley Academy, a coed college-preparatory boarding and day school in Squaw Valley. Your critical insight and evaluation herein will be extremely helpful as we consider his or her application. We sincerely thank you for your assistance in helping us evaluate this applicant. If you have any questions about us, please do not hesitate to telephone or to check our web page at www.sva.org

Your Name _____ Today's Date _____

Your Position _____ School _____

School Mailing Address _____

How long have you known applicant? _____ In what capacity? _____

I. Academic Traits - Please rank the applicant in comparison with other students of the same age you have known or taught in your school by placing a check mark in the appropriate position on each line.

A. Intellectual Aptitude	_____	_____	_____
	Low	Average	Very high
B. Study Habits	_____	_____	_____
	Low	Average	Very high
C. Academic Motivation	_____	_____	_____
	Low	Average	Very high
D. Intellectual Curiosity	_____	_____	_____
	Low	Average	Very high
E. Academic Imagination	_____	_____	_____
	Low	Average	Very high

II. Overall Ranking - In comparison with students of the same age, please summarize your rankings below.

As a Student _____
Weak Fair Average Good Outstanding

As a Person _____
Weak Fair Average Good Outstanding

III. Personal Traits - Please rank the applicant in comparison with other students of the same age you have known or taught in your school by circling the appropriate number on each line.

	Below Avg	Fair	Good	Excellent	Outstanding
A. Sense of Humor	1	2	3	4	5
B. Reaction to Criticism	1	2	3	4	5
C. Reaction to Setbacks	1	2	3	4	5
D. Self-Confidence	1	2	3	4	5
E. Concern for Others	1	2	3	4	5
F. Standards of Personal Conduct	1	2	3	4	5
G. Standard of Personal Integrity	1	2	3	4	5
H. General Emotional Stability	1	2	3	4	5
I. Self-Discipline	1	2	3	4	5
J. Initiative and Drive	1	2	3	4	5
K. General Level of Maturity	1	2	3	4	5

IV. Please tell us anything else you can about the candidate which will help us to understand him or her better as a student and as a person. Outdoor activities including winter sports are integral to our program; your comments regarding the student's general athletic ability and attitude are most helpful.

V. Has the applicant been subject to serious disciplinary or academic censure? If yes, please explain.

VI. Is s/he the kind of person you would wish to associate with your own son or daughter? Please comment.

VII. I place my recommendation for this candidate's admission to Squaw Valley Academy as follows:

With great enthusiasm _____ With confidence _____ With some confidence _____
 With reservation * _____ I do not recommend* _____

* Please explain your reservation or negative recommendation:

Counselor: Please have the following records and information forwarded to SVA by email, fax, or mail:

- An official copy of the high school transcripts.
- A copy of scores from any standardized aptitude or achievement test taken in the past several years.
- A copy of the student disciplinary records (if none, please indicate in writing)
- A copy of the Individual Education Plan, if applicable.