



**2018 -2019
International Student
Sponsorship Information**

Student Last Name (Please Print)	First Name	Grade
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Sponsor Last Name (Please Print)	First Name
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U.S. Address	City	State	Zip
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Work Telephone Address	Home Phone	Cell Phone	E-mail
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The Sponsor plays a vital role in the International Student's success during their educational experience at San Gabriel Academy. The student will live with the sponsor or another approved adult.

Please check the option that correctly completes these statements:

- Friend Friend of Family Family/Relative Legal Guardian Only

(if related, please specify)

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- | | | |
|---|------------------------------|-----------------------------|
| I know this student. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I feel comfortable being this student's Host. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I would like to receive mailings about school activities. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I communicate in English. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| I understand that I am responsible for the well being of the student. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

The Sponsor is the legal guardian for the student while here in the United States. Therefore, they must provide a legal document, provided by the parent, stating that they have permission to care for and provide medical treatment as necessary for the student. They will receive the school mailings, including the calendar and grades. They will be the contact person to give permission for students for school related activities. In essence, they act as the Student's parent while the student is in the United States. Should the student move to another home or another guardian, the person listed on this form will remain responsible until a new form is completed.

I agree to be this student's Sponsor for the 2018 - 2019 school year.

Signature	Date
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