

Date of Application: _____

Grade Entering: _____

***Applicant Information:** Please complete **ALL** questions.

Legal Name on Passport of Student: _____
 Last First Middle Initial English Name: _____

Male Female Date of Birth: ____/____/____ Country of Birth: _____ Country of Citizenship: _____
 Month Day Year

Foreign Address: _____
 Street City

State/Province Country Postal Code (Zip Code)

Foreign Telephone Number: _____ Student Email: _____

Student Mobile Number: _____ Passport Number: _____

Student We Chat ID: _____ Passport Country of Issuance: _____

Student SKYPE ID: _____ Languages: _____

***Family Information:**

Name: (Mr./Mrs./Ms./Dr./Other) _____ Name: (Mr./Mrs./Ms./Dr./Other) _____

Occupation: _____ Occupation: _____

Email Address: _____ Email Address: _____

Mobile Number: _____ Mobile Number: _____

We Chat ID: _____ We Chat ID: _____

Guardian Information:

Name: _____ Driver's License Number: _____
 Last First Middle Initial

Address: _____
 Street City Zip Code

Phone Number: _____ Email Address: _____

Mobile Number: _____ Relationship to Student: _____

Emergency Contact Information (if parent or guardian cannot be reached):

Name: _____ Phone Number: _____

Student's Academic Information:

Last School Attended or Attending: _____ Grade Completed: _____

School Address: _____
Street City State/Province Zip Code

Phone Number: _____ Reason for Leaving: _____

Has the student been dismissed, withdrawn, or suspended from any school for any reason? If yes, please explain (include school):

Does the student have any specific academic needs? If yes, please explain: _____

Does the student have any clinically diagnosed learning disabilities? If yes, please explain: _____

Student's Interests:

List student's special interests and talents (i.e., music, athletics, art, chess, etc.): _____

What is student's favorite subject? Why? _____

What are student's hobbies? _____

Any awards? _____

Any community services? _____

How did you hear about Stoneridge Preparatory School? Family/Friends Agent: _____

Internet Other: _____

***Financials:**

Program Start Date: _____ Program End Date: _____

Tuition and Fees: _____ Living Expenses: _____

Personal Funds: _____ Funds From Another Source: _____

Funds From School / Type of Fund: _____

Other Costs (Specify): _____

****Please note * marked sections must be completed in order to process I-20.***

Expectations:

A student enrolled in Stoneridge Preparatory School is expected to behave in an acceptable morals and values. Unacceptable behavior may result in suspension or dismissal from school.

We agree to support Stoneridge Preparatory School in its goals, procedures, and discipline policies. We understand that Stoneridge Preparatory School is a private institution and reserves the right to cancel the enrollment of any student who does not abide by school standards and requirements.

We agree above information is true and correct. We understand false information or failure to provide information could result in application rejection.

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

Submit this application, all documents on the check list, and a check for application. All documents and fees must be present in order to process application. All fees are non-refundable.

Stoneridge Preparatory School admits students of any race, color, and national origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of gender, race, color, national, or ethnic origin in the administration of our educational policies, admissions policies, tuition assistance programs, athletic and other school administered programs.

Contractual Agreement:

We, the undersigned,:

1. Agree to fulfill all financial obligations:
 - a. Tuition and fees will be paid upon notification of acceptance to Stoneridge Preparatory School.
 - b. In the event of withdrawal or dismissal, all fees and tuition are non-refundable.
2. Agree to abide by Stoneridge Preparatory School's guidelines as outlined in the Student Handbook.
3. Acknowledge that students' images may be used for promotional purposes unless this is declined in writing before enrollment.

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____

Administrator/Counselor Recommendation Form

To the Parent/Guardian: Recommendation form must be sent from an administrator’s or counselor’s school email. This form may also be printed out, signed, and given to your child’s administrator/counselor with a stamped envelope.

Student’s Name: _____

Grade: _____

Parent/Guardian Authorization Signature: _____

Date: _____

For the student named above, I authorize the release of school records, including an official transcript of all grades and evaluations, testing results, and information regarding disciplinary actions. I acknowledge to waive my rights to read this Recommendation form.

To the Administrator/Counselor: Please complete the following information and send this form to Stoneridge Preparatory School Admissions Office, 17487 Arrow Blvd., Fontana, CA 92335, USA or scan and email to admissions@stoneridgeprepschools.org titled “Recommendation Form – Student Name.”

Please rate the above-named student’s qualities and potential by using the following scale:

5 – Outstanding 4 – Excellent 3 – Good 2 – Fair 1 – Below Average N/A – Did not Observe

Academic Qualities

Study Habits:	5	4	3	2	1	N/A
Motivation:	5	4	3	2	1	N/A
Ability to Work Independently:	5	4	3	2	1	N/A
Organization skills:	5	4	3	2	1	N/A
Self-discipline:	5	4	3	2	1	N/A
Attendance:	5	4	3	2	1	N/A

Personal Qualities

Academic Commitment:	5	4	3	2	1	N/A
Relationships with peers:	5	4	3	2	1	N/A
Relationships with teachers:	5	4	3	2	1	N/A
Leadership:	5	4	3	2	1	N/A
Accepts discipline:	5	4	3	2	1	N/A
Academic integrity:	5	4	3	2	1	N/A
Respects rules and guidelines:	5	4	3	2	1	N/A

Has there been any disciplinary infractions? _____



APPLICATION FOR ADMISSION
International 6th–12th

Family Information

Communication with school:	Never	Rarely	Sometimes	Usually	Always
Attendance to school functions:	Never	Rarely	Sometimes	Usually	Always
Cooperation with school's rules:	Never	Rarely	Sometimes	Usually	Always
Cooperation with school's faculty/administration:	Never	Rarely	Sometimes	Usually	Always

For how long and in what context have you known this student? _____

To your knowledge, has the student ever been referred to a counselor or a psychologist for psychological or educational testing?

To your knowledge, has this student ever been involved in a behavior modification program? _____

I recommend this student for admission to Stoneridge Preparatory School:

_____ With confidence _____ Recommend _____ With reservation _____ Difficult to recommend

Additional recommendation/comments:

Name: _____

Position/Title: _____

Signature: _____

Date: _____

School Name: _____

School Phone Number: _____

School Address: _____

Teacher Recommendation Form – Math

To the Parent/Guardian: Recommendation form must be sent from a teacher’s school email. This form may also be printed out, signed, and given to your child’s teacher with a stamped envelope.

Student’s Name: _____

Grade: _____

Parent/Guardian Authorization Signature: _____

Date: _____

I acknowledge to waive my rights to read this Recommendation form.

To the Teacher: Please complete the following information and send this form to Stoneridge Preparatory School Admissions Office, 17487 Arrow Blvd., Fontana, CA 92335, USA or scan and email to admissions@stoneridgeprepschools.org titled “Recommendation Form – Student Name.”

Please rate the above-named student’s qualities and potential by using the following scale:

5 – Outstanding

4 – Excellent

3 – Good

2 – Fair

1 – Below Average

N/A – Did not Observe

Academic Qualities

Oral communication skills:	5	4	3	2	1	N/A
Written communication skills:	5	4	3	2	1	N/A
Motivation:	5	4	3	2	1	N/A
Ability to Work Independently:	5	4	3	2	1	N/A
Organization skills:	5	4	3	2	1	N/A
Self-discipline:	5	4	3	2	1	N/A
Completes assignments on time:	5	4	3	2	1	N/A
Overall academic capabilities:	5	4	3	2	1	N/A

Personal Qualities

Classroom conduct:	5	4	3	2	1	N/A
Relationships with peers:	5	4	3	2	1	N/A
Relationships with teachers:	5	4	3	2	1	N/A
Leadership:	5	4	3	2	1	N/A
Accepts discipline:	5	4	3	2	1	N/A
Academic integrity:	5	4	3	2	1	N/A
Respects rules and guidelines:	5	4	3	2	1	N/A



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Cooperation with school's faculty/administration:	Never	Rarely	Sometimes	Usually	Always

For how long have you known this student and what is your impression? _____

To your knowledge, has your school had to make any special accommodations for this student (i.e., extended testing time, modified work, preferential seating)? _____

Has there been any disciplinary infractions? _____

I recommend this student for admission to Stoneridge Preparatory School:

_____ With confidence _____ Recommend _____ With reservation _____ Difficult to recommend

Additional recommendation/comments:

Signature of Teacher: _____

Date: _____

Name: _____

Title: _____

School Name: _____

School Phone Number: _____

School Address: _____

Teacher Recommendation Form – English

To the Parent/Guardian: Recommendation form must be sent from a teacher’s school email. This form may also be printed out, signed, and given to your child’s teacher with a stamped envelope.

Student’s Name: _____

Grade: _____

Parent/Guardian Authorization Signature: _____

Date: _____

I acknowledge to waive my rights to read this Recommendation form.

To the Teacher: Please complete the following information and send this form to Stoneridge Preparatory School Admissions Office, 17487 Arrow Blvd., Fontana, CA 92335, USA or scan and email to admissions@stoneridgeprepschools.org titled “Recommendation Form – Student Name.”

Please rate the above-named student’s qualities and potential by using the following scale:

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Has there been any disciplinary infractions? _____

I recommend this student for admission to Stoneridge Preparatory School:

_____ With confidence _____ Recommend _____ With reservation _____ Difficult to recommend

Additional recommendation/comments:

Signature of Teacher: _____

Date: _____

Name: _____

Title: _____

School Name: _____

School Phone Number: _____

School Address: _____

Guardian Information Form

In order to form a partnership between home and school, the guardian must provide a notarized power of attorney from the parents in the home country. There are no exceptions to this rule.

Name of Guardian: _____
Last First Middle Initial

Address of Guardian: _____
Street City Zip Code

Home Phone Number: _____

Mobile Number: _____

Work Number: _____

Email Address: _____

WeChat ID: _____

Employer/Work Place: _____

Driver's License Number: _____

Relationship to Student: _____

As a guardian, I fully accept the legal and financial responsibilities for the student named

_____ beginning on this date _____. I know that I will remain guardian until the student graduates or until such time as the parents of the above student choose another responsible adult to be guardian.

Signature: _____

Print Name: _____

Date: _____