



105 E. Main Street  
Leesburg, FL 34748  
[www.beaconcollege.edu](http://www.beaconcollege.edu)  
Office: 855-220-5376  
Fax: 352-787-0796

## International Applicant Check List

***Application and Non-refundable Application Fee (\$50.00).*** Carefully complete and sign the application form or apply online at <http://www.beaconcollege.edu/beacon-college-how-to-apply/>.

***Recent psycho-educational evaluation*** that provides evidence of a learning disability, ADHD, or other academic-based challenges and struggles. The date of the report should be less than three years from the current date and include a cognitive assessment conducted by a licensed psychologist, neuropsychologist, school psychologist, or a certified school psychologist.

***Personal interview:*** On-campus, telephone, or Skype interviews can be arranged for prospective students.

***Instructor or counselor recommendations:*** Please submit recommendation letters from a teacher, professor or guidance/college counselor who knows you well. If you need, we can supply you with a recommendation form to distribute to the educator(s) of your choice.

***Official High School and College Transcripts.*** Enrollment is contingent upon receipt of an official and final high school transcript and official transcripts of any other colleges attended (if applicable).  
*\*Please note that not all diploma types are acceptable for admission.*

***English as a Second Language.*** English proficiency is required for participation in Beacon College's program. If English is not a student's first language, he or she must submit one of the following:

- Test of English as a Foreign Language/TOEFL: Minimum score of 525 (paper-based), 197 (computer-based) or 71 (internet-based).
- International English Language Testing System/IELTS: Minimum score of 6.0

***Copy of official passport.*** It is mandatory that all international students have a copy of their passports prior to enrollment at Beacon College. Student visas cannot be processed until a copy is received.

***Declaration and Certification of Financial Support AND Account Verification Forms.*** Prior to an I-20 being issued, students must provide forms to certify adequate financial resources to pay at least one year of study at Beacon College. Forms can be downloaded from the Beacon College website or by contacting the Admissions Office, 855-220-5376 or [admissions@beaconcollege.edu](mailto:admissions@beaconcollege.edu).



105 E. Main Street  
Leesburg, FL 34748  
[www.beaconcollege.edu](http://www.beaconcollege.edu)  
Office: 855-220-5376  
Fax: 352-787-0796

## International Student Application for Admission

### Anticipated Major/Degree of Study:

- Anthrozoology, Bachelor of Science
- Business Management, Bachelor of Science
  - Business Management Track
  - Hospitality Track
- Computer Information System, Bachelor of Science
  - Information Systems Track
  - Web & Digital Media Track
- Human Services:  Associate of Arts  Bachelor of Arts
- Humanities  Associate of Arts  Bachelor of Arts
- Psychology  Associate of Arts  Bachelor of Arts
- Studio Arts  Associate of Arts  Bachelor of Arts
- Undecided/Undeclared
- BREAKTHROUGH Semester for College Students

### Term of Entry:

- Fall Semester 20\_\_\_\_\_
- Spring Semester 20\_\_\_\_\_

### Student Housing Plans:

- Live on Campus
- Commute

*For program details and eligibility, please see the Beacon College website: [www.BeaconCollege.edu/Breakthrough](http://www.BeaconCollege.edu/Breakthrough).*

**Student Information:**  Male  Female

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Student Email Address: \_\_\_\_\_

Date of Birth: (Month): \_\_\_\_\_ (Day): \_\_\_\_\_ (Year): \_\_\_\_\_

How did you learn of Beacon College? \_\_\_\_\_

Have you previously attended Beacon College?  No  Yes: (Dates) \_\_\_\_\_

### Optional Questions (for statistical purposes only)

Are you Hispanic or Latino?  No  Yes

Please describe your racial background (select one or more of the following categories):

- American Indian or Alaskan Native  Native Hawaiian or Other Pacific Islander
- Asian  White
- Black or African American  Two or more races

**High School Information:**  Public  Private  Private/LD Specific  Home-school

Name of High School: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Graduation Date/Anticipated Graduation Date: Month: \_\_\_\_\_ Year: \_\_\_\_\_

Guidance Counselor/Specialist Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Diploma Type:  Standard High School Diploma  GED

*Please note that Special Diplomas or Certificates of Attendance do not meet regional accreditation standards and requirements for enrollment at Beacon College.*

**Educational Information:** Describe your specific learning challenge(s):

---

---

---

---

Are you a first generation college student (the first in your family to attend college)?  Yes  No

Is English the primary language spoken in your home?  Yes  No

**College Information:** Have you attended another college or university?  Yes  No

Name of College	City	State/Country	Dates Attended	Degree Completed
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Have you been the subject of any disciplinary action for conduct at a previous institution?  Yes  No

If YES, please explain: \_\_\_\_\_

---

---

**References:**

Please provide the name and contact information for three references. We recommend that you use teachers, tutors, guidance counselors, or employers.

Name	Relationship to Student	Email Address	Phone Number

YES! I authorize Beacon College to contact my high school guidance office on my behalf.

**Parent Information:**

Parents:       Married       Divorced       Separated       Deceased       Single

If you do not reside with both parents, with whom do you reside? \_\_\_\_\_

Person responsible for financial obligations: \_\_\_\_\_

Parent One:     Father       Mother       Guardian       Other: \_\_\_\_\_

Name: \_\_\_\_\_

Address (if different from yours): \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_

Highest Degree:     Doctoral     Masters     Bachelors     Associates     High School     Unknown/NA

Parent Two:     Father       Mother       Guardian       Other: \_\_\_\_\_

Name: \_\_\_\_\_

Address (if different from yours): \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of Employer: \_\_\_\_\_

Occupation/Title: \_\_\_\_\_

Highest Degree:     Doctoral     Masters     Bachelors     Associates     High School     Unknown/NA

**Disclosure Statement:** Have you ever been convicted in any state or country of a criminal offense, other than a minor traffic offense, where you have been found guilty by a judge or jury or entered a plea of nolo contendere (no contest); or any juvenile offenses; any offences where the records have been expunged; or any conviction that the applicant is currently appealing, regardless of adjudication?       Yes       No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The disclosure is a continuing duty. All applicants must report to Beacon College any such arrest or conviction after the filing of the application for admissions or during the time that the student is enrolled at the college. The admissions committee and Beacon College will consider new information submitted, and in appropriate circumstances, may change the status of an applicant or student. Permission is hereby given to Beacon College to make any necessary inquiries and I voluntarily and knowingly authorize any former school, government agency, employer, person, firm, corporation, its officers, employees and agents, or any other person or entity making a written or oral request for such information.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**Statement of Understanding and Release:**

To the best of my knowledge and belief, the information given on this application is complete and accurate. I realize that failure to disclose fully and accurately all facts related to this application shall be grounds for dismissal from Beacon College. If admitted, I pledge to comply with all rules and regulations of the college.

Permission is hereby given to Beacon College to make any necessary inquiries and I voluntarily and knowingly authorize any former school, government agency, employer, person, firm, corporation, its officers, employees and agents, or any other person or entity making written or oral requests for such information.

I authorize Beacon College to request and receive all academic records of any school that I have listed for the purpose of completing my application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Send completed application and required documentation along with the \$50.00 non-refundable application fee to:

**Beacon College Office of Admissions**  
105 E. Main Street    Leesburg, FL 34748  
Admissions: 855-220-5376 (toll free)  
352-787-0796 (fax)  
admissions@beaconcollege.edu