Foreign Exchange Visitor Guidelines

The Rudolf Steiner High School offers placement of a foreign language exchange student for the tenth grade The program allows mature and motivated students to learn and live in a foreign country for up to four months. Foreign exchanges will foster competence and fluency in English and offers an immersion in a different cultural environment.

Host Country Possibilities

The School maintains relationships with Waldorf Schools in Germany, Austria, Switzerland, France, Spain, and Chile to arrange foreign exchanges.

Application Guidelines

How to Apply:

There is a formal application process that includes written statements and agreements for both students and parents.

Qualifications for Students

- 10th grade students
- Basic English skills required
- Good standing in all aspects of school life.
- Ability to be away from home for an extended period of time.

Financial Responsibilities

Tuition:

- The tuition is exchanged with the host School.

Other Expenses:

- Arrange and finance air fare and all other travel expenses.
- Provide spending money so the students can participate in social life and cover personal expenses while away. Debit cards are recommended.

  Spending Money:
- Parents should provide adequate spending money for their child. Debit cards are best for this purpose. The monthly amount can be estimated with the help of the foreign exchange student's family.

Travel Documents and Insurance

Health and Travel Insurance

- Students must have a valid passport
- Valid Visa
- Arrange for proper health insurance coverage while away (mandatory)
- Purchase travel insurance that would cover various kinds of expenses in case of illness and other emergencies. (mandatory)

Foreign Language teachers will help facilitate all that is needed for the student to go to the foreign country, including host family communications.

Application Checklist

- A passport photo
- Rudolf Steiner School Foreign Exchange Visitor Application Form
- A letter of recommendation from your language teacher
- International Health Insurance verification
- A copy of your latest school report
- Information for travel documents form

Rudolf Steiner School Foreign Exchange Visitor Application Form

Rudolf Steiner School
15 East 78th Street
New York, NY 10075
Phone: 212-879-1101 Fax: 212-794-1554

Student's Legal Name_____
Last First Middle

Birthdate_____ Birthplace_____ Citizenship_____
M/D/YR

Preferred address for all correspondence regarding this application:

Name_____

Street Address_____ Apt. #_____

City, State, Zip_____

Country_____

Email address_____

Phone Number_____ Mobile Phone Number_____

Please provide the following information even if the student's biological parents may be separated, divorced, deceased, or the child may be living with the legal guardian:

Father's Name_____ Mother's Name_____

Home Address_____ Home Address_____

City, State, Zip_____ City, State, Zip_____

Email address_____ Email address_____

Phone Number_____ Phone Number_____

Mobile Number_____ Mobile Number_____

Occupation/Employer_____ Occupation/Employer_____

Bus. Address/Phone_____ Business Address/Phone_____

Marital status of parent(s): Married_____Separated_____Divorced_____Widowed_____Unmarried_____
With whom does the applicant live? _____

I/we understand and accept our role and expectations of the exchange student and student's family during his/her stay at the Rudolf Steiner School. We agree to continue to pay school fees at our son/daughter's home school and agree to accommodate the exchange of our son/daughter free of charge.

Student Signature _____ Date_____
Student's Family Signature_____ Date_____

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1. Please submit a recommendation letter from you language teacher and send to: foreignexchange@steiner.edu.

2. Include a photograph of student. Please send to the foreign exchange email: foreignexchange@steiner.edu.

Name of Teacher_____ Date_____

Rudolf Steiner School Foreign Exchange Health Verification Form

Please provide the following health care information:

International Health Care Provider:
_____

Emergency Contact Information:
_____

Any additional medical information needed for visit:
_____

Any medical expenses incurred by the visiting student will be the responsibility of the visiting family. Please be sure to arrange for your own international coverage.

I/we understand and accept our role and expectations of the exchange student and student's family during his/her stay at the Rudolf Steiner School. We understand medical coverage is our responsibility during the duration of the foreign exchange.

Student Signature _____
Date_____
Student's Family Signature_____
Date_____

Information for travel documents

(Required)

Name of Student (First, Middle, Last)

_____

Address in Home Country_____

_____

Phone Number in Home Country_____

Country of Birth_____

Country of Citizenship_____

Date of Birth (Month/Day/Year such as January 1, 1998)_____

Dates of Travel (arrival and departure)_____

Steiner Student Host_____

Host Family Address (NYC)_____

_____

Host Family Phone Number_____