



Application for Full-Time Enrollment

REQUIREMENTS

- 1. Completed Application Form
- 2. **Student Essay** In a minimum of 500 words, please tell us why you would like to attend Weil Academy. What do you hope to gain? What are your personal and academic goals for the next few years? What do you hope to contribute to the Weil community? Feel free to tell us anything else about your tennis background.
- 3. Official School Transcript (translated to English, if applicable)
- 4. 2-3 minute Tennis Video
- 5. (For International students only) Duolingo Test Score recommended for English placement
- 6. \$250.00 Application Fee
- 7. (Optional) Recommendation letter by coach, peer, teacher etc.

Your application will not be considered complete until all items listed above have been received. Application should be submitted via email to enrollment@weiltennis.com

Today's Date:	Day / Year	_				
SECTION 1: BIOGRAPHICAL						
Student Name:	First	Middle		☐ Female		
Student's Date of Birth:	Month / Day / Year	City & Country of B	lirth:			
Passport #:		_ Issuing Country:				
Internati	ional Applicants: Ple	ase attach a copy of the studen	t's passport information	page.		
I am applying for:		☐ Boarding☐ Weil College Prep School	☐ Non-Boarding☐ Other			
Home Address:						
City:	_ State/Region:	Postal Cod	de:			
Country:	Home Phone #:					
Student's Email Address:	Cell Phone #:					
SECTION 2: TENNIS						
USTA #:	USTA Account Email:					
USTA Account Password:						
UTR: UTR Account Email: _		UTR Accou	ınt Password:			
Coach's Name:	Fmai	ļ.	Cell:			





School you currently attend: ______ School Name, City, Country Cumulative GPA: Have you taken the Scholastic Aptitude Test (SAT)? ☐ No ☐ Yes Scores: Math______ Verbal_____ Have you taken the Test Of English as a Foreign Language (TOEFL)? □ No □ Yes Score: Does the student require any special learning assistance due to a learning disability? □ No □ Yes If yes, please explain: Does the student have any IEPs or 504 plan in place? ☐ No ☐ Yes If yes, please indicate, and include documentation along with application. Are there any special accommodations or support The Applicant requires (e.g., academic, emotional, physical)? ☐ No ☐ Yes If yes, please explain: **SECTION 4: FAMILY** Father's Name: _____ E-Mail: ____ Home Address: (Please complete only if different from student's address) Home Phone #: Cell: Work: Employer: _____Occupation: ____ Mother's Name: _____ E-Mail: _____ Home Address: (Please complete only if different from student's address) Home Phone #: _____ Cell: _____ Work: _____ Employer: _____Occupation: _____ Emergency Contact (other than parents): Name: _____ Relationship: _____

Phone#: _____ City/State: _____





Credit Card Authorization

Name of Card Holder:				
Billing Address:				
City / State / Posta Code ,	/ Country:			
☐ MASTERCARD	☐ VISA	(we do not accept AmEx)		
Card #:		Exp	Month / Year	CVV: Last 3 digits on back of card
1.				idemy to charge my credit
card for the amount of \$2				,
Signature:			_ Date:	

^{*}Please note that applying does not guarantee acceptance. Once the enrollment committee reviews the application, and the prospective student conducts their visit, we will reach out to confirm or deny applicants and if accepted proceed with enrollment details.