LeRêve Scholars of Art
INTERNATIONAL

LeRêve Art tower, 21,
Baekjegobun-ro 32-gil, Songpa-gu,
Seoul, South Korea
PHONE +82-2-542-4252
admissions@lsai.kr
www.lsai.kr

APPLICATION FOR ADMISSION

Student Information

Name _____ _____ _____
LAST FIRST MIDDLE

Preferred Name _____

Date of Birth ____ / ____ / ____ **Age** _____ **Gender** Female / Male
MONTH DAY YEAR

Current Grade _____ **Applying for Grade** _____

Country of Citizenship _____

Email Address _____

Phone _____

Home Address _____

Current School

School Name _____

School Type _____ **Grades Completed** ☐ Grade 9 ☐ Grade 10 ☐ Grade 11 ☐ Grade 12

Date Started _____ **Date End** _____

School Address _____

School Phone _____

Previous School

School Name _____

School Type _____ **Grades Completed** ☐ Grade 9 ☐ Grade 10 ☐ Grade 11 ☐ Grade 12

Date Started _____ **Date End** _____

School Address _____

School Phone _____

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Family Information

Father

Name _____

Email Address _____

Mobile Phone _____ **Company** _____

Work Phone _____ **Position** _____

Mother

Name _____

Email Address _____

Mobile Phone _____ **Company** _____

Work Phone _____ **Position** _____

Siblings

Name _____ **Age** _____

School _____

Name _____ **Age** _____

School _____

By entering your names, the below named hereby agree they filled everything out accurately and honestly and authorize the lawful release of all academic records, test scores, and other materials required for the admissions process.

Name of Students : _____ **Date :** _____

Name of Parents : _____ **Date :** _____

Additional Information

Test Score

TOEFL _____ **Duolingo** _____

SSAT _____ **ISEE** _____