

Important Notice:

AIS-Salzburg can only consider applications from those who are vaccinated against COVID-19 or have recovered from an infection within the past six months and have official documentation.

-The Administration



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Student Application Form

Photograph
Please attach a recent portrait photograph here

Instructions:

1. Attach a photograph and fill out this form completely.
2. Request that your present, or most-recent English and mathematics teachers fill out the teacher recommendation forms and send them directly to our school.
3. Send complete transcripts of your current and previous school years.
4. Payment of € 75.- (application fee). Beneficiary:
The American International School-Salzburg
Raiffeisenverband Salzburg
Moosstrasse 13, A-5020 Salzburg, Austria
BIC: RVSAAT2S
IBAN: AT84 3500 0000 0814 5054

Important Notice: The submission of this application form containing your personal data requires your specific consent through signature at the bottom of the form. By giving your consent, you agree to grant AIS-Salzburg the authority to collect, process, and store the personal data provided within the guidelines of the General Data Protection Regulations (DGPR 2016/679) of the European Union.

Student Details

Last Name: _____

First Name: _____

Gender: M/F: _____ Date of Birth: (D) _____ (M) _____ (Y) _____

Nationality: _____

Mailing Address: _____

Home phone: _____

Fax: _____

E-mail: _____

Parent/Guardian Details

Mother

Full Name: _____

Employer: _____

Work phone: _____

E-mail: _____

Father

Full Name: _____

Employer: _____

Work phone: _____

E-mail: _____

Guardian info _____

How did you hear about our school? _____

Desired Status	Desired Grade Level
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<input type="checkbox"/> 7-Day Full Boarder	<input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9
<input type="checkbox"/> 5-Day Boarder	<input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12
<input type="checkbox"/> Day Student	<input type="checkbox"/> Postgraduate

Details of Former School

Name of School: _____ Grades attended: _____

Address: _____

Telephone: _____ Fax: _____ E-mail: _____

Name of Head: _____ Name of Counselor: _____

Years of Enrollment: _____ Most recent grade level: _____

Personal Statements

Student's Name

Please answer each of the following questions in your own words.
Your honest responses are an important element of our considerations.

1 What prompts you to apply to our school?

2 What reading have you enjoyed most in the past years?

3 What free-time activities do you enjoy the most?

4 What are your plans for university studies?



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The American International School-Salzburg • Moosstrasse 106 • A-5020 Salzburg Austria
office@ais-salzburg.at • Fax +43 662 824555