**STUDENT INFORMATION**

FIRST AND LAST NAME: (STUDENT 1)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SCHOOL GRADE: **\_\_\_\_\_\_\_\_\_**SEX: **\_\_\_\_\_\_\_\_\_\_**

FIRST AND LAST NAME: (STUDENT 2)

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** SCHOOL GRADE: **\_\_\_\_\_\_\_\_\_**SEX: **\_\_\_\_\_\_\_\_\_\_**

MAILING ADDRESS: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**CITY & STATE: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

ZIP CODE:**\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE DESCRIBE STUDENT I LEVEL OF BOSNIAN LANGUAGE:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE DESCRIBE STUDENT II LEVEL OF BOSNIAN LANGUAGE:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE PROVIDE ANY SPECIFIC SPECIAL NEED OF STUDENT(S):**

**PARENTS’ INFORMATION:**

FATHER (FIRST AND LAST NAME): **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

HOME PHONE: **\_\_\_\_\_\_\_\_\_\_\_\_\_**WORK PHONE: **\_\_\_\_\_\_\_\_\_\_\_\_** CELL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MOTHER (FIRST AND LAST NAME):**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

HOME PHONE: **\_\_\_\_\_\_\_\_\_\_\_\_\_**WORK PHONE: **\_\_\_\_\_\_\_\_\_\_\_\_** CELL:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PROGRAM PRICE FOR BOSNIAN LANGUAGE SCHOOL:**

SEMESTER **I** - MEMBERS - $168 ($12 PER HOUR)

NON - MEMBERS - $202. ($14.50 PER HOUR)

PRICE FOR THE SECOND CHILD IS 30% LESS

SEMESTER **I** BEGINS ON SUNDAY, SEPTEMBER 11, 2022 FROM 10 – 11 AM

**SEMESTER I - CLASS SCHEDULE:**

SEPTEMBER 11, 18, AND 25

OCTOBER 2, 9, 16, 23, AND 30

NOVEMBER 6, 13, AND 20 (NO SCHOOL ON NOVEMBER 27th DUE TO

THANKSGIVING – NOVEMBER 24th)

DECEMBER 4, 11, AND 18 (NO SCHOOL ON DECEMBER 25 DUE TO CHRISMAS – DECEMBER 25)

PLEASE FORWARD COMPLETED APPLICATION TO THE FOLLOWING EMAIL ADDRESS: [jcesic@yahoo.com](mailto:jcesic@yahoo.com)

ALSO, PLEASE SEND THE CHECK TO THE FOLLOWING ADDRESS:

NEW ENGLAND FRIENDS OF BOSNIA AND HERZEGOVINA

ATTN: BOSNIAN LANGUAGE SCHOOL

10 HARVEY STREET

CAMBRIDGE, MA 02140

PLEASE MAKE THE CHECK PAYABLE TO: **NEW ENGLAND FRIENDS OF BIH**

IN CORRESPONDENCE LINE PLEASE INDICATE: FOR BOSNIAN LANGUAGE SCHOOL

PLEASE FILL OUT THE APPLICATION AND SEND THE CHECK IMMIDIATELY UPON SENDING AN APPLICATION. YOUR CHILD / CHILDREN WILL BE REGISTERED UPON THE RECEIPT OF THE CHECK AND APPLICATION.

THANK YOU.