



# **SPRING INTERNATIONAL**

**L A N G U A G E C E N T E R**

## **EVENING ENGLISH PROGRAM**

**Need help with your English skills, but don't have time during the day?**

**Spring International Language Center's Evening English Class provides:**

- ◆ Integrated instruction
- ◆ Reading, Writing, Listening, and Speaking
- ◆ Preparation for real life needs
- ◆ Professionally-designed curriculum
- ◆ Experienced and qualified instructors
- ◆ Excellent learning environment



Let our 38 years of experience in preparing students for university studies, professional development, and personal needs work for you!

**Contact** us TODAY at 303.797.0100 or [info@spring.edu](mailto:info@spring.edu) for more information



**Visit** our office across the street from Arapahoe Community College



**Complete** and return the attached application to:  
Spring International Language Center  
2575 West Church Avenue  
Littleton, CO 80120

***Se Habla Español***

### **2018 SCHEDULE**

**We offer 5 sessions each year. Each session is 8 weeks long, 2x a week.**

- Jan. 16 – Mar. 8
- Mar. 27 – May 17
- Jun. 5 – Jul. 26
- Aug. 28 – Oct. 18
- Oct. 30 – Dec. 20

### **Class Times:**

- Tuesday & Thursday  
5:30 p.m. – 7:30 p.m.  
*(With a 10-15 minute break)*

### **Cost:**

- \$125 Application fee (One-time, non-refundable)
- \$400 for each 8 week session, including materials

### **Contact:**

303.797.0100  
[info@spring.edu](mailto:info@spring.edu)  
[www.spring.edu](http://www.spring.edu)



Spring International Language Center



# SPRING INTERNATIONAL LANGUAGE CENTER

## EVENING ENGLISH PROGRAM APPLICATION FOR ADMISSION

<b>SUBMIT APPLICATION MATERIALS TO:</b> <b>Spring International Language Center</b> 2575 West Church Avenue Littleton, Colorado 80120 <a href="mailto:info@spring.edu">info@spring.edu</a>   <a href="http://www.spring.edu">www.spring.edu</a>		<b>WHAT TO SEND</b> <input type="checkbox"/> Completed Application Form <input type="checkbox"/> Copy of Photo ID <input type="checkbox"/> Application Fee of \$125 (non-refundable)	
Family (Last) Name		First Name	
		Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	
Country of Birth	Native Language	Country of Citizenship	Date of Birth (Month / Day / Year) / /
Home Address	Number and Street	City	State Zip
Telephone Number		E-mail Address	

<b>What Term do you wish to begin your studies?</b>	
<input type="checkbox"/> Winter Term: Jan. 16 – Mar. 8, 2018	<input type="checkbox"/> Fall I Term: Aug. 28 – Oct. 18, 2018
<input type="checkbox"/> Spring Term: Mar. 27 – May 17, 2018	<input type="checkbox"/> Fall II Term: Oct. 30 – Dec. 20, 2018
<input type="checkbox"/> Summer Term: Jun. 5 – Jul. 26, 2018	

Have you had English language training in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where did you attend and how long? (School name, Location, and Length of Study)
What areas do you struggle the most with?
What do you hope to gain from this program?
Where did you hear about our program? <input type="checkbox"/> Family / Friends <input type="checkbox"/> Facebook <input type="checkbox"/> Arapahoe Community College <input type="checkbox"/> Advertisement <input type="checkbox"/> Other (Please explain)

<b>FINANCIAL AND HEALTH STATEMENT</b>		
<b>Financial Certification:</b> I hereby certify that I will be legally responsible for all costs incurred in connection with my studies at Spring International Language Center.		
<b>Medical Authorization:</b> In the event of illness or injury, I authorize any appropriate medical authority to diagnose and treat me. I further authorize release of information for the purpose of medical treatment and health insurance. I understand that I am responsible for medical expenses above the limits of any applicable medical insurance.		
<b>If applicant is under 18 years of age:</b> A Parent or Guardian must complete and sign the <b>PARENT/GUARDIAN</b> section below.		
<b>APPLICANT SIGNATURE &amp; DATE</b>		
<b>PARENT/GUARDIAN SIGNATURE &amp; DATE</b>		
Relationship to Applicant	Telephone Number	E-mail Address