

## FLOYD COUNTY BOARD OF EDUCATION Anna Whitaker Shepherd, Superintendent 442 KY RT 550 Eastern, KY 41622 Telephone (606) 886-2354 Fax (606) 886-4550 www.floyd.kyschools.us

Linda C. Gearheart, Board Chair - District 1 William Newsome, Jr., Vice-Chair - District 3 Dr. Chandra Varia, Member- District 2 Keith Smallwood, Member - District 4 Steve Slone, Member - District 5

V. Shephord

Consent Agenda Item (Action Item): Consider/Approve retroactively an EF High School Exchange Year High School Enrollment Agreement with Betsy Layne High School

Applicable State or Regulations: KRS 160.160 Powers and Duties of the Local Board of Education.

Fiscal/Budgetary Impact: No associated cost to School Board

History/Background: The EF High school Exchange Year would like to enroll a participating school for the Spring Semester (Jan—May 2023) at Betsy Layne High School. EF High School Exchange Year has been designated by the United State Department of State as an exchange visitor program sponsor. This enables EF High School Exchange Year to issue each student a DS-2019 form, the certificate of eligibility students use in order to apply for a J-1 Visa. Federal regulations require that before a student enters the US on a J-1 Visa, EF must receive a letter of acceptance from the host high school. The student in question spent the first semester in Madison County and is in the process of changing host families and would like to come to Betsy Layne High School and live with a new Host Family. Cara Begley (606) 626-5066 will be the International Exchange Coordinator Contact for EF High School Exchange Year.

Recommended Action: Approve the agreement retroactively as presented.

Contact Person(s): Jody Roberts Principal

Justin Akers School Counselor

Date: January 10, 2023

EF High School Exchange Year Two Education Circle Cambridge, MA 02141

Tel: 800-447-4273 Fax: 617-619-1401 efexchangeyear.org

## **High School Enrollment Agreement**

Student name	Mimi Shinozak	i			Student nur	nber	J P T 2	1 1 2 9	8 0
In which grade	level will the studer	nt be enrolled: 🗖 9	<b>1</b> 0	<b>1</b> 11	<b>□</b> 12			ined at time of re	gistration
		Student status:	✓ Fall full-year	☐ Fall ha	alf-vear □ S				Year: 2023
Dear Principal As the Internat high school du program spons require that bef letter of accepts United States I in order to enro	ional Exchange Coor ring his or her excha or. This enables us to ore a student enters ance of enrollment in Department of State. oll an EF High School	rdinator (IEC) for EF ange year. EF High S o issue each student a the U.S. on a J-1 visa your school. EF Hig Your school is not req ol Exchange Year stud	High School Exc chool Exchange Y DS-2019 form, to we must receive h School Exchang quired to register we lent. Please do no	hange Year Year has be the certifica a letter of a ge Year shal with the go t hesitate to	r, I am pleased ten designated ate of eligibil acceptance fr I assume all re vernment's Si o make a cop	d that a d by th ity stuc om the esponsi EVIS d y of th	student partici le United State dents use in orc host high scho ibility for the st latabase (Studen is form for you	ipating in our prop s Department of der to apply for a pool. Your signature udent, as set forth nt and Exchange V r records, if necess	gram will be attending your State as an exchange visitor J-1 visa. Federal regulations on this form will serve as a in regulations issued by the /isitor Information System)
you for your su	pport of intercultura	l exchange!							
Cara Begle	у								
International F	xchange Coordinate	or (IEC)							
477.000	as (title) <b>Super</b> tudy indicated on th		Inna Wh	at the h	niet school li	sped be	elow, I accept t Date	his exchange stud p = <b>23</b>	ent into our school for
	OL INFORMATIO								
School name Betsy Layne High School					Type of school  ☑ Public  ☐ Private				
Street 554 Bobcat Blvd					Will your school charge any MANDATORY FEES or TUITION in order to				
City Stanville State KY Zip 41659					enroll the above-named exchange student?   Yes  No				
Website					TUITION (please note if per semester of full academic year):				
		rax number lifferent from above		· ·	ANDATO	DVEE	\$		W 20 2
	-	interent from above			Book Fee:	KIFE		f per semester of full .	
		ate			☐ BOOK Fee: ☐ Activities F	iga			
					Uniform F				
							e: S		
Title of main school contact					☐ Transportation Fee: \$				
Phone number of main school contact ()					Please explain				
E-mail of ma	in school contact _								
This year's school start date					Total cost of	тит	ION and/or N	MANDATORY F	CE. ¢
School closing date (pending snow days)					iotai cost oi	1011	ION and/or iv	IANDATORI F	EES 5
Student enrollment number					EF High School Exchange Year would greatly appreciate it if you could send an official				
Deadline for registration					invoice of these costs to 617-619-1401 as soon as possible. If you wish to provide further information about any tuition or fees or your invoicing process/timeline, please do so here:				
		E COORDINATOR		-			INFORMATI		
Name Cara Begley					Name Jeffrey Coleman				
Street42 Mary Drive           CityInez Stak(Y Zip 41224					Street 31 Scass Drive				
									Zip 41605
		626-5066							
Phone work (	) _			:					
Fax Number (	)_				Parent's wo	rk2 (_		_)	