

AMERICAN ACADEMY OF INTERNATIONAL EDUCATION

Educational Inquiry Form

Please complete, and send this form to us for evaluation and to help provide you with appropriate counseling.

There is NO fee for the registration, counseling or inquiry, but complete information is required.

I wish to study at American Academy (AAIE)

I wish to study at other schools in your network

Location: <input type="checkbox"/> USA: _____ <input type="checkbox"/> Canada: _____ <input type="checkbox"/> Africa: _____ <input type="checkbox"/> Asia: _____ <input type="checkbox"/> Caribbean: _____ <input type="checkbox"/> Europe: _____ <input type="checkbox"/> The Middle East: _____ <input type="checkbox"/> Pacific Region: _____	Level & Field of Study: <input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Technical / Vocational <input type="checkbox"/> University 1. _____ 2. _____ 3. _____
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STUDENT PROFILE

Name: (Last/First/Middle): _____

Home Address: _____

Email: _____ Date of Birth: _____

City & Country of Birth: _____ Citizenship: _____

Gender: Male Female _____ (optional)

I am sending my resume (curriculum vitae) and copies of my academic records (transcripts/diplomas) & photo by regular, airmail or FedEx, etc.

- **Please do not send these documents as attachments to this inquiry form for cybersecurity reasons. We do not open any attachments.**
- **If you have any questions, please send us an email: info@americanacademyedu.org**
- Your personal information is not used for any commercial purposes. It may be shared with other academic institutions for evaluation, or admission. Those institutions may wish to contact you directly for admission or other information.

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