



Benjamin Bosse High School

International Baccalaureate Diploma Programme

1300 Washington Avenue
Evansville, Indiana 47714
812.477.1661



Registration Form

(PLEASE PRINT)

Student Name _____ School _____

Student e-mail address _____

Date of Birth _____ Graduation Year _____

Parent(s) Name _____

Parent(s) e-mail address _____

Address _____ Phone _____

City _____ State _____ Zip _____ Gender M _____ F _____

Do you qualify for free/reduced textbooks & have current documents on file? YES _____ NO _____

Select one:

____ Full Diploma Candidate

____ Certificate Candidate

Courses: _____

**All registration forms must be returned to the Bosse High School IB Coordinator
with a \$25 non-refundable deposit.**

Registration and Test fee(s) are set by the IBO. The fees are the responsibility of the applicant and non-refundable.

Any questions should be referred to Mrs. Michele Hays, Diploma Programme Coordinator at 812.435.8888 Ext. 41139 or by email at michele.hays@evsck12.com.

Parent Signature: _____ Date: _____

Student Signature: _____ Date: _____

| | | | |
|--------------------------------|-------------------|--------------------------------------|-------|
| Office Use: | | | |
| Deposit _____ | Received on _____ | IBIS Registration completed on _____ | |
| Tests: Junior year (max of 2): | _____ | _____ | _____ |
| Senior year (remaining): | _____ | _____ | _____ |
| | _____ | _____ | _____ |