

GRACE

PREP HIGH SCHOOL

Returning International Student Application 2012-2013

Application Fee

\$125 if received by March 16th, 2012

\$225 if received by March 30th, 2012

\$325 After March 30th, 2012

Returning International Student Application

to be filled out by parent or legal guardian



STUDENT(S) RETURNING TO GRACE PREP

STUDENT 1

_____/_____/_____ Male Female
Last First Grade Date of Birth

Student Cell Phone Student Email S M L XL XXL
Shirt Size

Student Favorite Scripture Student Favorite Cake Flavor Student Favorite Cookie

STUDENT 2

_____/_____/_____ Male Female
Last First Grade Date of Birth

Student Cell Phone Student Email S M L XL XXL
Shirt Size

Student Favorite Scripture Student Favorite Cake Flavor Student Favorite Cookie

Parent Name(s) _____

Home Address _____

Preferred Email _____

Preferred Phone _____

This is for my _____ home / work / cell _____ home / work / cell

Guardian Name(s) _____

Guardian Address _____ City _____ State _____ Zip _____

Preferred Email _____

Preferred Phone _____

This is for my _____ home / work / cell _____ home / work / cell

Secondary Phone _____

This is for my _____ home / work / cell _____ home / work / cell

Last Resort Phone _____

This is for my _____ home / work / cell _____ home / work / cell

Emergency Contact's Name _____

Cell Phone _____ Home Phone _____ Work Phone _____

Alternate Contact's Name _____

Cell Phone _____ Home Phone _____ Work Phone _____

Is busing needed? Yes No

Tuition & Fee Payment Plan International Student



to be filled out by a parent or legal guardian • submit to Grace Prep

Payment Options

All tuition payments begin July 1, but we offer three payment options enabling every family to receive discounts. Please choose one.

- Option #1-** Full Payment by July 1, 2012 *with a 2% discount*
- Option #2-** Half Payments by July 1, 2012 and January 1, 2013 *with a 1% discount*
- Option #3-** Monthly Payments from July 30, 2012 - June 30, 2013

Twelve monthly payments are due on the last business day of each month. **All monthly payments will be remitted through Electronic Funds Transfer (EFT) on the last business day of the month.**

Tuition Worksheet: Use this to determine your tuition

Some fees incurred throughout the school year can now be included in your monthly payment. However you have the option to either pay them separately or combine them. Choose the optional elective below to determine your final tuition amount.

(The August Extreme Grace fee of \$199 can not be included but is required.)

<input checked="" type="checkbox"/>	Tuition:	\$22,000
<input type="checkbox"/>	Soccer Participation:	+ \$200
<input type="checkbox"/>	Basketball Participation:	+ \$200
<input checked="" type="checkbox"/>	January Extreme Grace: Required	+ \$99
<input checked="" type="checkbox"/>	April AirSchool: Required	+ \$99
<input type="checkbox"/>	Drama:	+ \$200
<input type="checkbox"/>	Tech Fee:	+ \$150
<input type="checkbox"/>	Tech Fee: I'll provide my own laptop:	+ \$75
<input checked="" type="checkbox"/>	Intensive ESL speaking & writing mentoring:	+ \$2,000
	<i>(based on teacher evaluation)</i>	

My Total Tuition: _____

Please initial if you have read and understand.

In order for us to properly budget and plan, partial-year students pay the full semester tuition amount for any semester they participate in, whether one day, or all but one day, the same rate applies.

Parent's Initials

It is your decision as to when you enter or leave, so please consider this before you make your entrance or exit plans.

You're going to love Grace Prep, but if you happen to move in the middle of the year we will let you go. Report cards and transcripts will be sent to the student's new school upon full payment.

Parent's Initials

I hereby agree to pay the above tuition for the 2012-2013 school year. I understand that financial aid may be considered after this application, financial aid application, and supporting documents are returned to Grace Prep.

Student's Name _____

Parent's Name _____

Parent's Signature _____

Date _____

For multiple students, please provide multiple copies of this document.

Parent & Student Permission Forms



to be filled out by a parent or legal guardian • submit to Grace Prep

If you'd kindly take the time to read through these statements as well as the student handbook, we'll save you a lot of time throughout the year. In signing these, you equip Grace Prep to meet many legal requirements and consolidate paper work that will be required several times throughout the year.

1. Student Textbook Agreement

I hereby agree to responsibly care for any textbooks, books, and materials lent to me by the school. I will return all materials at the end of the course and/or school year. If I have lost or damaged the materials, I will pay for replacements.

2. Certificate of Request for Loan of Textbooks and Instructional Materials

This grants Grace Prep permission to use materials purchased through Act 195-90. This is a state grant for non-public schools. This program is available to Pennsylvania residents.

I hereby request the loan of textbooks and materials in accordance with the Pennsylvania School Code 1949 for my child(ren) attending Grace Prep.

3. Release of Photographs and Quotations

Yes No

Grace Prep would love to use photographs and quotations of the students on our web page and in school publications. Likewise, there will be times when Grace would like to use photographs of classroom settings and school events for news stories and school promotion.

4. Accident Release

Grace Prep will do everything to insure the safety of your child(ren) while at school, school activities or on field trips. We cannot allow your child(ren) to participate in any activities without your release should an accident occur. I relieve Grace Prep of any responsibility in the event that my child should be injured in any way during school, school activities or field trips of any type.

I will not hold Grace Prep, Grace Prep employees or volunteers responsible for any accidents that may occur.

5. Permission to Ride in Vehicles Driven by Adult Drivers

On field trips and excursions, students will need transportation in private cars of parents, teachers, or in school vehicles. We must have your release to provide this transportation. This also protects you as a parent driver. I give my son/daughter permission to ride with coaches and volunteer adult drivers to any school events, field trips, sports practices, home games, away games or any other activity the school offers. I request that my child be transported as stated, and I relieve Grace Prep of any responsibility in the event that my child should be injured in any way during transportation to such activities.

I will not hold Grace Prep, Grace Prep employees or volunteer drivers responsible for any accidents that may occur.

6. Permission to Drive with Student Drivers

Yes No

Some parents feel comfortable with their children riding in cars driven by teen drivers. Others are not comfortable with this. We want to fall under the authority of parents when allowing students to leave school with another student driver. Therefore, we ask you to discuss your family standards with your students ahead of time and fill this out so we may respond according to your requests.

Name(s) of Student(s)

Parent/Guardian's Signature

Date

Please have your student sign below.

I have discussed this form with my parents and fully understand what it means.

Student's Signature

Date

Parent & Student Permission Forms_{,cont'd}



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A separate form for each student must be supplied at the beginning of each school year. This will serve as the permission for all school athletic programs as well as the state mandated health records.

Name _____ Age _____ Grade _____

Please place a check by the following items which are true concerning your student and offer specific details on the line provided.

- Student takes continuing medications (list and give reasons) _____
 - Student suffers from allergies _____
 - Student suffers from major medical problems/illness _____
 - Student has been previously hospitalized _____
 - Student has a history of seizures/loss of consciousness _____
 - Student has asthma/wheezing during or after exercise _____
 - Student's past injuries necessitate absence from sports/activities _____
 - Student has current temporary medical concerns _____
 - Student has permission to take over-the-counter medications provided by parent and dispensed by school office.
- Date of last tetanus immunization _____

Health Insurance Provider _____ Group/Policy Number _____ Expiration Date _____

I hereby state that, to the best of my knowledge, the answers to the above questions are correct. I give my permission for the provision of medical treatment to the above student if necessary during sports participation.

Parent's Signature _____ Date _____



In order to participate in sports, the student must have a recent physical exam by his/her physician. The physician's nurse will fill out this portion and the physician must sign it.

Physician's Name _____ Office Phone Number _____

Date of Examination _____ Pulse _____ Blood Pressure _____

Are there any abnormal physical findings that the school needs to know about in order to let them participate in athletic programs safely?

What is the general health of this student?

Recommendations: **Full** participation in sports **No** participation in sports **Limited** participation in sports
Requirements of Limited participation: _____

Healthcare Provider's Signature _____ Date _____