

Enrolment Application 2024/2025

document checklist (upon application)

complete & signed application
 student's birth certificate
 one parent's birth certificate or citizenship card/passport.
 one parent's BC driver's license
 medical information, including MSP#

Fees (upon application) □ \$300 non-refundable deposit □ Registration fee

Fees (due June 1, after invoice) □ Direct withdrawal bank forms w/ void cheque OR □ Full tuition, less 3% discount, postdated Aug 1

Date of Enrolment: Date of Exit:

STUDENT INFORMATION

Please use information on birth certificate:

Late Name:	F	irst Name:	Middle Name:	
Birthdate: year	month	day	Birthplace:	_
Preferred Name (if o	ther than on Bi	rth Certificate): _		
Preferred Pronouns	(if other than o	n Birth Certificate	2):	
Name and location o	f last school att	ended:		

GUARDIAN INFORMATION

*Information must be provided for both legal guardians, when applicable. If 1st guardian has sole custody, please provide documentation.

<u>1st Guardian</u> :		Parent 🗆 Other 🗆
Street Address:		Email:
Mail Address:		Cell:
Postal Code:	Phone:	Work Phone:
2nd Guardian:		Parent 🗆 Other 🗆
Street Address:		Email:
Mail Address:		Cell:
Postal Code:	Phone:	Work Phone:

Enrolment Agreement Contract 2024-2025 School Year

NEW AND RETURNING FAMILIES AGREE, BY CHECKING WHERE APPLICABLE:

1. To pay the School applicable registration fees:

□ \$300.00 non-refundable deposit per family (Applicable for all pre-registrations and will be deducted from tuition payments)

Registration fee **\$85.00** 1st child **\$60.00** 2nd child **\$45.00** 3rd child **[These fees are due and cashed at the time of enrolment and are non-refundable.]**

2. To pay tuition to the School: (select one)

\$5900 per year (includes supply fees)
*monthly payments, over 11 months (less tuition deposit) = \$509.10
or
*pay in full with 3% discount \$5432

□ **\$13660** per year (includes supply fees) **Non-BC resident/Canadian Citizen or early-entry kindergarten** (non-eligible for Ministry of Education Grant portion of tuition)

MINUS:

□ 1st Sibling Reduction per year of \$1100

□ 2nd Sibling Reduction per year of \$1250

□ as per Work Exchange application attached

These fees are paid in full (3% reduction applies) by August 1 2024, or by monthly Direct Deposit, over 11 months, beginning August 1/24. Direct withdrawal forms for monthly tuition payments, or post-dated cheque for full tuition, to be submitted to office no later than June 1, 2024 to finalize registration.

OPTIONAL:

Add Secret Angel Fund Payment, an anonymous tuition fund to help families in need of tuition assistance. This amount can be added to your regular monthly tuition payments or be a one time donation.

□ plus **\$25** per month □ plus **\$50** per month □ plus **\$__** per month □ \$___ one time donation (cheque included)

PARENT/GUARDIAN INITIALS ______ & _____

Enrolment Agreement Contract 2024-2025 School Year (continued)

3. To make tuition payment either in full herewith, or by Direct Withdrawal, deducted from my account the first of each month, in eleven (11) equal instalments, said account information delivered no later than June 1st 2024.

Alternate payment arrangements must be accepted by the GES Board's Financial Committee.

4. That should the parent/guardian wish to withdraw their child, for any reason, after Aug **1**. 2024 they shall be liable for payment of full fees agreed to in section **2**, for the entire school year. Note: when a student is withdrawn, the school loses the student's Ministry portion of school funding equal to approximately \$7700/year.

5. To pay an additional **\$29** per day for absences in excess of **26 school** days prior to May 25, 2025 (except due to illness) to compensate for lost Ministry funding. In the case of an extended absence (e.g. extended holiday) funding can still be received if the school continues to provide and supervise the student's educational program and assesses student progress. Parents are responsible for informing the office and teacher in <u>advance</u> of such an absence. Parents are also responsible for committing time to oversee program and sign out and return any borrowed resources, as well as submitting the student's <u>finished</u> work to their teacher for review.

6. <u>Arrears</u>- That, in the event a cheque or payment is returned, a notice requiring immediate payment will be issued and a fee of \$30 will be charged for every such notice. Payment will be made upon receipt of this notice or arrangements for payment made through the school office. Further tuition arrears will be referred to the School Board at which time recommendations for action will be made. Failure to receive payment may result in the student losing their placement in the school. Arrangement for such arrears to be paid must be made <u>prior</u> to a student being re-enrolled in the school.

7. That a \$30.00 fee will be charged for each change to work exchange agreements. This is to cover administration fees related to paperwork, recruiting, banking etc., which are a result of such changes.

8. That parents/guardians will read the Parent Handbook, which will be forwarded upon completion of enrolment.

PARENT/GUARDIAN INITIALS ______ & _____

Part B- Suspension, Withdrawal and Re-enrolment

1. The School may suspend the student(s), withdraw the student, or refuse to re-enrol the student, for:

- a)non-payment of tuition/fees or other breach of this agreement by the parent/guardian
- b)violent or disruptive behaviour by the student(s); or c)other good and sufficient cause.

2. In the event of withdrawal of the student(s) from enrolment by the School under 1(b) or (c), this agreement shall be deemed to be terminated and the parent/guardian shall be relieved from any obligation to pay fees after the date of such withdrawal.

Part C - Trial Period

All new to SSCS students and families are accepted with the understanding that there will be a mutual trial period before full commitment. This is to allow the family to withdraw from the school should they find the experience not what they expected for their child, and for the school to determine suitability for enrolment. It also allows the student a grace period to settle in to the class should it prove difficult at first. The trial period is six weeks from first day attended.

The family reserves the right to withdraw their child(ren) from enrolment in the school at any time during the Trial Period with no commitment to pay tuition for the rest of the semester. Registration fees and tuition for days attended will be charged.

The school reserves the right to decline the application for enrollment at any time during, or upon completion of, the Trial Period. Registration fees and tuition for days attended will be charged.

I understand the purpose and guidelines of the six-week trial period

Parent Signature:	Date:
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Parent Signature:_____ Date:_____

PARENT/GUARDIAN INITIALS ______ & _____

Legal Residency of Parent

To be completed and signed by a parent or legal (court-appointed) guardian. If legal guardian, attach a copy of court order appointing you as legal guardian.

(Lawfully admitted into Canada) 1. I am (please X one):

□ A Canadian citizen (if born in Canada, please attach a photocopy of birth certificate; if not born in Canada, please attach photocopy of citizenship paper/card)

A Permanent Resident (attach photocopy)

□ Lawfully admitted to Canada under one of the following documents (please mark the appropriate box below and attach photocopy of document):

□ Admission as a refugee claimant

A person claiming refugee status who has a letter of no objection

□ Student authorization (student visa) for two or more years

Employment authorization (working permit) for two or more years

A person carrying out official duties as a diplomatic or consular

□ Other:	(must be cleared with Immigration Canada)

(Residency in British Columbia)

2. I am a resident of British Columbia	(please X one)	:
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□ Yes (Please attach photocopy of driver's license) Residency address:

□ No I am not a resident of British Columbia

3. Confirming signatures:

Parent's / Legal Guardian's Signature:_____ Date:_____

Parent's / Legal Guardian's Signature:_____ Date:_____

DECLARATION:

THE UNDERSIGNED AGREE TO THE ABOVE CONDITIONS AND FURTHER CERTIFY THAT THE INFORMATION PROVIDED IN THE ENROLMENT AGREEMENT CONTRACT IS CORRECT, TO THE BEST OF THEIR KNOWLEDGE.

1st Guardian Signature:_____ Date_____

2nd Guardian Signature:_____ Date_____

For the Ganges Educational Society _____ Date _____

Please note the both Guardians signatures are required unless proof of sole guardianship accompanies this application.

MEDICAL INFORMATION
Does your child carry a medic alert? Yes 🗆 No 🗆 Explain:
Does your child have any allergies? Yes □ No □ Explain:
Health Number:
Family Doctor: Phone:
Emergency contact in case parent/guardians are unavailable: Name: Number:
Emergency Medical Attention: If you have special restrictions on the hospital care of your child, please explain:
In the event of an emergency, I and I give permission for staff at SSCS to seek emergency medical attention and act on my behalf until myself or my child's physician is present. (This includes calling an ambulance if necessary).
Parent Signature: Date: Date:
First Aid Information:
My child needs the following first-aid/emergency item or medication at school. (Please include instructions):
□ in the office □ with her/him
*Note: For each medication, we need parental authority to administer, as per Doctor's note. Please see the office for specific form, as needed.

STUDENT TRANSPORTATION WAIVER

indicates your permission notification otherwise). (a minimum of \$1,000,000 booster seat)	n for your child to participate in all Drivers have submitted driver's al liability; no child will sit in a seat do hereby give permission for	private vehicles for fieldtrips. Your signature below l on-island fieldtrips (unless you give specific bstracts; RCMP criminal record checks; vehicles have with an airbag; all children under 9 years will use a to be transported by private vehicle	
Parent Signature <u>:</u>	Parent Signature:	Date:	
PERMISSION FOR NON-	PARENT PICK-UP:		
		arent or legal guardian will not be picking up their ce. The following list can be added to by written	
I,, from school in the event t	hereby give my permission for the hat I am unable to do so.	below listed individuals to pick up my son/daughter	
1.) 2.) 3.)	4.) 5.) 6.)	□ All SSCS parents	
If above names need to ch	nange, please alert the Office as soc	on as possible.	
PHOTO PERMISSION:			
I,, do hereby give permission for Salt Spring Centre School to use pictures of my child(ren) , for promotional use for the school. I understand that these pictures may be used in magazines, brochures, hand billets, newspaper ads or articles, or on the school website and social media pages. I understand the school will ask for specific permission for use for any other reason than for school promotion.			
1st Parent/Guardian Sig	nature <u>:</u>	Date:	
2 nd Parent/Guardian Sig	gnature:	Date:	

Work Exchange Program 2024-2025

The work exchange program is an important part of the school community. It allows families to be involved in key aspects of the school in exchange for a tuition reduction. These responsibilities strengthen the family's relationship with the school. Also, it benefits the children as they have the opportunity to interact with other parents in the school.

Applications are reviewed by the Financial Committee, which consists of the Administrator, the Principal, the Bookkeeper, and a Board Member. The Committee tries to meet each family's request while dividing the positions fairly. Positions are re-applied for every year.

APPLICATIONS FOR WORK EXCHANGE ARE AVAILABLE ON THE SSCS WEBSITE, OR IN THE OFFICE.