



**THE VILLAGE SCHOOL
APPLICATION FOR ENROLLMENT
2015-2016**

Student's Information

Last Name _____ First Name _____ MI _____
Preferred Name _____ Gender M F Date of Birth ____/____/____
Address _____
City _____ ST _____ Zip _____ Phone _____
Race: Caucasian African American Asian Hispanic Other _____
Last 4 digits of SS# _____ Church Affiliation _____
Allergies/Restrictions _____
Child's Physician _____ Phone _____

Father's Information

Name _____ Last 4 digits of SS# _____
Address (if different from student) _____
City _____ ST _____ Zip _____ Church Affiliation _____
Occupation _____ Employer _____ Marital Status _____
Home Phone _____ Cell Phone _____ Work Phone _____
Primary E-mail _____
Legal Custody of Child Y N Permitted to remove child from school Y N (legal document req'd)

Mother's Information

Name _____ Last 4 digits of SS# _____
Address (if different from student) _____
City _____ ST _____ Zip _____ Church Affiliation _____
Occupation _____ Employer _____ Marital Status _____
Home Phone _____ Cell Phone _____ Work Phone _____
Primary E-mail _____
Legal Custody of Child Y N Permitted to remove child from school Y N (legal document req'd)

Please check the class that your child should be enrolled in for the **2015-2016** school year.
(grade placement must be verified by school records before placement)

Kindergarten (Child must be 5 before September 1, 2015) Did your child participate in VPK(Voluntary PK)? **Y N**
 1st Grade 2nd Grade 3rd Grade 4th Grade
 5th Grade 6th Grade 7th Grade 8th Grade

School Last Attended _____
Reason for Transfer _____

Office Use Only

Application Fee _____ Check # _____ Ck. Date _____ Date/Time Received _____
Acceptance Date _____
Curriculum Fee _____ Check # _____ Ck. Date _____ Date/Time Received _____



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As part of the enrollment process in The Village School, please answer the following questions and return with your Application for Enrollment.

Special Services:

1. Has your child ever been referred for any of the following evaluations: academic, speech, behavioral, or psychological? Yes No

If yes, please answer the following questions:

- A. When was the recommendation made? _____
B. Reason for referral. _____
C. Name of the school. _____
D. Was the evaluation completed? _____

2. Does your child currently require any special services? Yes No

If yes, please explain: _____

If your child requires any special services (modifications or accommodations, speech, OT, reading, etc.) please provide any appropriate documentation along with your Application for Enrollment.

3. Has your child ever been (suspended or) subjected to any school-related or legal disciplinary action? Yes No

If yes, please provide relevant information on a separate sheet of paper.

Student Name: _____ Date of Birth: _____

Parent Signature: _____ Date: _____

The Village School admits students of any race, color, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national and ethnic origin in administration of its educational policies, admissions policies, scholarship and loan programs, and athletic and other school-administered programs.



**ENROLLMENT FINANCIAL AGREEMENT
THE VILLAGE SCHOOL
2015-2016**

FINANCIAL AGREEMENT

I acknowledge and agree to be responsible for payment of all fees which shall include registration, tuition and all additional services.

The first installment for the 2015-2016 school year is due on Friday, June 5, 2015, for all students. **If a student withdraws, this payment will not be refunded.**

I agree that all additional services, which include Before Care and/or After School Care, are due and payable with each tuition installment in accordance with the scheduled tuition payment dates.

I further agree that if the account becomes past due because of non-payment by the agreed upon payment date then I will be subject to any and all late fees as outlined in the payment schedule. My child will be subject to suspension or termination from attendance at school or child care services until the account is paid in full. In the event of an outstanding balance, payments received will be applied to the outstanding amount until the account is paid in full.

I understand that applications for tuition assistance may be submitted for returning students and are awarded by the School Board based on need. I understand that tuition assistance is not available for first year students.

I further agree to provide two weeks written notice, if I choose to withdraw my child from The Village School.

Student Name

Parent Name *(Please Print)*

Parent Signature

Date

This form must be signed in the presence of a notary

To Be Completed By Notary Public:

State of Florida
County of Collier

The foregoing instrument was acknowledged before me this _____ day of _____ 20__

By (print name) _____ who is personally known to me, or has produced a Driver's License # _____ issued by the State of Florida which expires on _____ as proof of identification and did not take an oath.

My Commission Expires:

Notary Public