

Lycée Franco-Américain International School

Dear Parent(s):

Thank you for your interest in Lycée Franco-Américain International School. Enclosed, please find the school's registration packet. We would be happy to meet with you for a school visit. Please let us know when you are available as visits and registrations are done by appointment.

If you have any questions after reviewing the registration information, please feel free to contact us by email or by phone:

admissions@lyceefrancoam.org

(954) 237-0356

<http://www.lyceefrancoam.org>

Sincerely,

Dr. Jacquelyne Hoy
Principal

POLICY OF NON-DISCRIMINATION

Lycée Franco-Américain International School admits students of any race, color, creed, national and ethnic origin to all the rights, privileges, programs, and activities generally accorded or made available to students at the school. It will not discriminate on the basis of race, color, creed, national or ethnic origin in administration of its educational policies and admissions policies.

STUDENTS WITH LIMITED LANGUAGE PROFICIENCY IN ENGLISH OR IN FRENCH

To ensure the academic success of the students in our school, the following plan is initiated to offer the support that your child will need to successfully complete our program.

Students with limited language proficiency in English or French will receive the following assistance:

- 1) Remedial class in the language if needed
- 2) English as a second language (ESOL) or French as a second language (FRESOL) in language arts classes
- 3) Teachers will be able to present instruction in other subject content in a way that all the students can understand
- 4) Additional French lessons will be available (optional)
- 5) Constant consultation with teachers regarding the student's development will be maintained
- 6) Quarterly evaluation plans will be initiated for the students in order to monitor their progress
- 7) Based on the progress of the students, teachers will use their discretion to determine when and how to give the mid-term exam to the students
- 8) All students will receive a grade for each marking period, mid-term and/or final exam.

Should you have any questions or concerns, please feel free to schedule an appointment with the administration.

ESOL classification

All students who scored below a C1 on the IPT test must be in ESOL remedial. All students who have a C1 can be exited from ESOL only if they scored 75% in reading and math in the SAT last year. If the student has not taken the SAT test, another assessment will be given (such as the DAR).

The grade accommodations for ESOL students are based on their categories (see below). The grade in English is evaluated based on ESOL grading accommodation on the progress reports and report cards:

- A1 - multiply grade by 1.9 for example: student gets a 45% $45 \times 1.9 = 85.5\%$
- A2 - multiply grade by 1.75
- B1 - multiply grade by 1.6
- B2 - multiply grade by 1.4
- C1 - multiply grade by 1.15 ***
- C2 - no change in grade

**** C1 level students who are exited from the ESOL program
will not receive any grading accommodations*

Lycée Franco-Américain International School

APPLICATION FOR ADMISSION 2017-2018

NEW STUDENT

Date _____

Please include my child as a student in grade _____ at Lycée Franco-Américain for the academic year 20 ____ -- 20 ____

STUDENT INFORMATION

Student Name _____ Age _____
FIRST MIDDLE LAST (YEARS) (MONTHS)

Home Address Line 1* _____
STREET ADDRESS, APT. #

Home Address Line 2* _____
CITY and ZIP CODE **this is where all school correspondence, including final reports, will be mailed.*

Date of Birth: MONTH _____ DAY _____ YEAR _____ Place of birth: _____

Parent's Social Security Number _____ Gender of student: Female Male

Child's Primary Language (*pick one*): ___ English ___ French ___ Spanish ___ Haitian Creole Other _____

Language(s) spoken at home: ___ English ___ French ___ Spanish ___ Haitian Creole Other _____

CONTACT INFORMATION

| | |
|--|--|
| Mother/Guardian 1: (First and last name) | Father/Guardian 2: (First and last name) |
| Email address(es) | Email address(es) |
| Home phone(s) | Home phone(s) |
| Cell phone(s) | Cell phone(s) |
| Work phone(s) | Work phone(s) |
| Place of business | Place of business |
| Occupation | Occupation |

If Parents are separated, with whom does the child live? _____

Parents of prospective candidates are advised to submit this application as soon as possible.

This application must be accompanied by a nonrefundable registration fee of **\$1800** for elementary grades, **\$1700** for kindergarten and **\$1275** for preschool. Please make check payable to Lycée Franco-Américain.

Mother's Signature (or Guardian 1)

Date

Father's Signature (or Guardian 2)

Date

No application will be processed until it is fully completed, signed and a nonrefundable registration fee has been paid.

Lycée Franco-Américain International School

STUDENT INFORMATION

Please be accurate concerning all items presented below, as Lycée Franco-Américain reserves the right to contact previous schools and independently verify all responses.

Name _____

Applicant's Current School _____ Present Grade _____

School Head/Principal/Counselor _____

Address of School _____
(Street) (City) (Zip Code)

Please list all schools attended, starting with preschool and give dates.

| School | City and State | Dates of Attendance |
|--------|----------------|---------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Has the applicant undergone any visual, hearing, I.Q. or other educational assessment during the past two years? Yes No
(If yes, please elaborate on a separate page or request to have a copy of the assessment forwarded to Lycée Franco-Américain)

Has the applicant ever been subject to major disciplinary action (suspension or dismissal) in any school? Yes No
(If yes, please explain on a separate page.)

Has the applicant previously applied for admission to Lycée Franco-Américain? Yes No
(If yes, when and for what grade?)

Describe any special circumstances that may have affected your child's experience in the past or that may do so in the future.

Has your child ever had any special tutoring? Please describe:

What are your child's academic strengths?

Lycée Franco-Américain International School

Emergency Procedure/Contact/Insurance Waiver

Emergency Procedure

In the event my child is involved in an accident or medical emergency (as determined by the administration and/or teachers and/or staff of Lycée Franco-Américain) and needs medical treatment, I/We

_____ as the parent/guardian of _____, give
(Print Your Name) (Print student's name)

Permission to Lycée Franco-Américain and/or its designee to ensure that medical intervention/treatment of my child is given by Emergency personnel to ensure that my child receives the proper medical treatment, under the provisions of the Medical Practice Act, in my absence should an injury occur. I understand that due to insurance regulations, injured or ill children must be transported to a hospital, when necessary, by paramedics or ambulance. They cannot be transported by school van or school personnel. It is also my intent to grant authority to administer and perform any and all examinations, X-ray examinations, treatments, anesthetics, and diagnostic procedures that may in the course of my child's care be deemed advisable and necessary. I also understand and agree that I will be responsible to pay for any and all charges incurred as a result of my child's treatment at the treating hospital and/or expense for transportation to a hospital.

My child DOES DOES NOT have medical insurance coverage.
(Circle one)

Insurance Carrier _____ Policy Number _____

Insurance Carrier's Authorization Telephone Number _____

Signature Date

(Please indicate with your signature that you understand the above emergency medical procedures and will accept responsibility for any and all emergency medical charges for transportation and treatment)

List all Allergies 1. _____ 2. _____ 3. _____ 4. _____

List all Medical conditions: 1. _____ 2. _____ 3. _____

Emergency Contact Numbers

In case of an accident or other medical emergency please contact the following people/parties in the order in which they are listed below. I understand that despite reasonable efforts to do so, you may not be able to contact a specific person listed and will attempt to contact the next person on this list as time and the situation dictates. I also understand that failure to contact any person on this list does not nullify my understanding and agreement with the above emergency medical procedure and will nonetheless accept responsibility for any and all emergency medical charges.

1. Name _____ Cell Phone _____ Home Phone _____ Work Phone _____

2. Name _____ Cell Phone _____ Home Phone _____ Work Phone _____

3. Name _____ Cell Phone _____ Home Phone _____ Work Phone _____

4. Name _____ Cell Phone _____ Home Phone _____ Work Phone _____

Signature Date

(Please indicate with your signature that you understand the above emergency medical contact procedures and will accept responsibility for any and all emergency medical charges.)

Lycée Franco-Américain International School

Authorized Dismissal/Pick-up Procedure

Student Name

Pass Code or Number

Please list below all people (including parents) allowed to pick up your child. These will be the only people to whom the school will release the child. (When picking up your child, they may be asked to provide current identification with a photo, such as a driver's license.)

1. Name _____ Relationship to Child _____
2. Name _____ Relationship to Child _____
3. Name _____ Relationship to Child _____
4. Name _____ Relationship to Child _____
5. Name _____ Relationship to Child _____
6. Name _____ Relationship to Child _____
7. Name _____ Relationship to Child _____
8. Name _____ Relationship to Child _____
9. Name _____ Relationship to Child _____
10. Name _____ Relationship to Child _____

Signature

Date

(Please indicate with your signature that Lycée Franco-Américain has your permission to release your child to those listed.)

Lycée Franco-Américain International School

TO WHOM IT MAY CONCERN:

I hereby give my consent to _____
NAME OF HOSPITAL

To administer necessary treatment to my child, _____,
NAME OF CHILD

In the event of an emergency at which time I cannot be reached.

I give consent to transportation by ambulance if situation warrants it.

Name of Physician: _____ Phone: _____

Allergies of Child: _____

Date of Last DPT or Tetanus: _____

Insurance Company Covering Child: _____

Policy Number: _____ Expiration Date: _____

SIGNATURE OF PARENT OR LEGAL GUARDIAN

DATE

Sworn to and subscribed before me this _____ day of _____, 20_____.

By _____
NAME OF PERSON ACKNOWLEDGE

My Commission Expires:

Signature of Notary Public, State of Florida

Print or Type Name of Notary as Commissioned

Personally known _____

Or Produced Identification _____

Type: _____

Lycée Franco-Américain International School

STATISTICAL INFORMATION REQUESTED OF THE SCHOOL BY VARIOUS GOVERNING AUTHORITIES

NAME OF STUDENT: _____

Citizenship (information requested yearly by the AEFÉ: Agence pour l'enseignement français à l'étranger):

USA Yes No

France Yes No

Other Yes No (if yes, European Union Yes No)

(Requested by the State of Florida)

Is student of Hispanic, Latino, or Spanish origin? Yes No

- **People of Hispanic, Latino, or Spanish origin are those who trace their origin or descent to Mexico, Puerto Rico, Cuba, Spanish-speaking countries of Central or South America, and other Spanish cultures. Origin can be considered as the heritage, nationality group, lineage, or country of birth of the person or the person's parents or ancestors before their arrival in the United States. People of Hispanic, Latino, or Spanish origin may be of any race.**

Select all those that apply (information requested yearly by the State of Florida):

White

- (Student has origins in any of the original peoples of Europe, the Middle East, or North Africa. This includes people who indicate their race as "White" or report entries such as Irish, German, Italian, Lebanese, Near Easterner, Arab, or Polish)

Black or African American

- (Student has origins in any of the Black racial groups of Africa. This includes people who indicate their race as "Black or African American" or provide written entries such as African American, Afro-American, Kenyan, Nigerian, or Haitian)

Asian

- (student has origins of any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam)

Multiracial

- (student who is of two or more races)

Other: _____

Signature

Date

Lycée Franco-Américain International School

Field Trip Permission Form

By signing below, I authorize my child to attend all field trips organized by Lycée Franco-Américain.

Child's name _____ Grade _____

Parent's Signature

Date

From the Parents Handbook

Field trips: The school will have a monthly field trip. Prior notice with details such as location, etc. will be given. These field trips are an integral part of our educational program. The fees are mandatory. Your permission for your child to participate in such excursions is part of this agreement.

Lycée Franco-Américain International School

Parental Permission and Agreement to Allow Student to Participate in Physical Education Class and Activities while in attendance at Lycée Franco-Américain Form

Lycée Franco-Américain, as part of a balanced educational program, offers/provides physical education activities to each of its students. These activities are conducted indoors and outdoors, weather permitting. The activities may be conducted on a paved surface and/or grass or mulch covered areas. The activities that may be offered/provided are conducted in groups and are as follows:

I/We _____ as the parent/guardian of _____
(Print your name) (Print student's name)

give permission to Lycée Franco-Américain and/or its designee to allow my student to participate in the physical education program as explained above, as it is conducted by the school. I also understand and agree/state that I know of no reason that my student should not participate in this program due to physical or mental reasons. I realize that in the conduct of this or any physical education program, injuries may occur to my student. I hold harmless Lycée Franco-Américain and/or its designees for such injuries and/or complications from such injuries. Furthermore I will be responsible to pay for any and all medical charges incurred as a result of my child's treatment for such injuries should they occur at the treating hospital and/or doctor as previously stated and agreed by me/us in the Emergency Procedure/Contact/Insurance Waiver Form now on file at Lycée Franco-Américain.

Signature

Date

(Please indicate with your signature that you understand the above Physical Education Program procedure and will accept responsibility for any and all emergency medical charges in the case of injury as agreed to in the Emergency Procedure/Contact/Insurance Waiver Form now on file at Lycée Franco-Américain.)

Lycée Franco-Américain International School

Consent for Photographs, Sound Recordings, And Use of Educational Data

I hereby give permission to Lycée Franco-Américain and members of its staff to take and use recordings and photographs of my child. I understand that the words “recordings and photographs” include, but are not limited to, still photographs, slides, moving pictures, sound recordings and/or videotapes.

I understand that these materials will be used for educational and marketing purposes, including but not limited to publication in professional journals and presented to audiences at conferences, workshops and seminars. These materials can also be used to inform the general public about the programs and the services offered by Lycée Franco-Américain and publicity photos to be published in newspapers, magazines, both locally and nationally, and the school’s websites.

In providing this consent, I waive all claims of action which I may have at any time against Lycée Franco-Américain, its employees and agents, relating to said photographs, slides, moving pictures, sound recordings, and/or videotapes, educational data and/or other methods of recording or reproducing likenesses of my child.

I understand that I will receive educational services whether or not I consent to taking and use of such materials.

Signature

Date

Lycée Franco-Américain International School

Needed for Elementary and Kindergarten Students
Not needed for Preschool Students

Parental Agreement Form Concerning Student Movement During School Day

Elementary School Students (Grades K-5)

Lycée Franco-Américain's policy does not permit any off campus movement of elementary school students during break period/recess/ and/or lunch periods.

All elementary school students remain on campus (in the actual school building/classroom areas/outdoor areas) unless escorted by a teacher and/or adult teacher aide as part of a scheduled field trip with a completed field trip permission form.

I/We _____ as the parent/guardian of _____
(Print your name) (Print student's name)

Give permission to Lycée Franco-Américain and/or its designees to limit my student's movements as I have indicated above. I realize that in permitting/directing the type of actions/movements indicated above that injuries might occur to my student. I hold harmless Lycée Franco-Américain and/or its designees for such injuries and/or complications from such injuries. Furthermore I will be responsible to pay for any and all charges incurred as a result of my child's treatment at the treating hospital and/or expense for transportation to a hospital as previously stated and agreed by me/us in the Emergency Procedure/Contact/Insurance Waiver Form now on file at Lycée Franco-Américain.

Signature

Date

(Please indicate with your signature that you understand the above break period/recess and/or lunch period procedures and will accept responsibility for any and all emergency medical charges in the case of injury as agreed to in the Emergency Procedure/Contact/Insurance Waiver Form now on file at Lycée Franco-Américain)

Lycée Franco-Américain International School

PE uniform needed for Elementary and Kindergarten Students
Field trip t-shirt needed for all students three years old and up

PHYSICAL EDUCATION UNIFORM & FIELD TRIP T-SHIRT ORDER FORM

Yes _____ No _____ P.E. Uniform PRICE: \$25.00 PER SET (T-SHIRT AND SHORTS INCLUDED)
Yes _____ No _____ Field Trip T-shirt \$12.00 each

AMOUNT ENCLOSED: \$ _____

Name of Student _____

Youth Sizes

T-Shirts

Shorts

Small 6-8 _____ _____

Medium 10-12 _____ _____

Large 14-16 _____ _____

X Large 18-20 _____ _____

Adult Sizes

Small _____ _____

Medium _____ _____

Large _____ _____

X Large _____ _____

Lycée Franco-Américain International School

Information for Parents to Keep

School Lunch Program

Lycée Franco-Américain has arranged to have a regularly scheduled lunch program for its students.

- A licensed caterer will be the food provider.
- The cost of the lunch is \$6.00 per day for all students. Orders placed before 9:15am for the same day will cost \$7.00 each. (Price subject to change.)
- Each month, the school menu will be posted on Praxi. If you wish to enroll in the school lunch program or change your child's selections please do so on Praxi.
- You may order as many or as few meals as you wish for the month.
However, the meal plan must be paid for by the month, in advance.
- Last minute orders will be accepted until 8:30am.
- This is not a mandatory program. Students may bring their own lunches.

Lycée Franco-Américain International School

Computer, iPad & Network Responsibility Agreement Form For Students

Computers, iPad, networks, and on-line telecommunications such as the Internet and e-mail, are becoming more commonplace in our classrooms and media centers every year. While these systems have the power to deliver a huge number of resources to our classrooms, their ability to serve students and teachers depends on the reasonable and ethical use of every device and system.

Lycée Franco-Américain has adopted a computer use policy that defines the appropriate use of technology at Lycée Franco-Américain. This policy describes how computers, iPad and networks must be used to support research and instructional activities in our classrooms, labs, and media centers. The policy has two themes. First, it promotes the use of technology as a powerful educational tool that is increasingly becoming a common part of every student's day. The second is that those students who use these computers, iPad and the networks to which they are connected, must act in accordance with prescribed rules and behavioral codes in the policy. Several major provisions are noted below.

Major Policy Provisions:

- Use of computers, iPad, networks, and on-line telecommunications systems must be related to students' educational activities.
- Students must recognize that computers, iPad, networks, and equipment used to support on-line telecommunications systems are shared devices, and agree to use them in ways that will maintain their continued operability for all users.
- No illegal activity may be conducted using Lycée Franco-Américain's computers, iPad, networks, or online telecommunications systems.
- Students must not access or distribute offensive, obscene, inflammatory, or pornographic material.
- Students must not intentionally spread computer viruses, vandalize data, infiltrate systems, or degrade/disrupt computer and/or network performance.
- All users of computers, iPad, networks, and on-line telecommunications systems shall adhere to laws regarding copyright.
- Students are not allowed to download programs (including games) on the computers or iPad.

By signing below, Parents and Students Acknowledge the Following Points:

- We understand that Lycée Franco-Américain has rules and regulations regarding the acceptable use of computers, iPad, networks, and on-line telecommunications systems.
- We agree that the use of these computers, iPad, networks, and on-line telecommunications resources will be done in accordance with these rules and regulations.
- We understand that failure to follow these rules may result in disciplinary action, denied or restricted use of computers, iPad, networks, and on-line telecommunications systems or appropriate legal measures being taken.
- We recognize that Lycée Franco-Américain has taken every reasonable measure to ensure that the information accessed over computer networks and through on-line telecommunications systems is appropriate.
- We also recognize that Lycée Franco-Américain cannot completely control all of the information published by way of the computer workstations or iPad on our networks or by way of connected on-line telecommunications systems. We agree not to hold Lycée Franco-Américain responsible if controversial material is inadvertently accessed on a school computer or iPad.

Parent/Guardian Signature

Student Signature

Date

2017-2018 LFA SCHOOL HANDBOOK

SELECT ONE OPTION:

Option 1 - Since the LFA School Handbook is currently available on the LFA website, I choose to access it online.

- www.lycee francoam.org – Select About Our School tab then Re-enroll Now

Option 2 - Even though the LFA School Handbook is available on the LFA website, I am requesting a hard copy now.

*If you chose option 1, please sign and return with your registration package

*If you choose option two, please return this page to the administration before returning your application package. You will receive another one with the hard copy of the 2017-2018 Student Manual.

I acknowledge that I have accessed the updated student handbook for the school year 2017-2018 online or received a copy, have read it and accept the rules and regulations outlined in the 2017-2018 School Year Student Handbook of the academic section in which my child is enrolled.

Parent Name: _____

Signature: _____

Date: _____

For Office Use Only:

LFA School Manual given to _____ on (date) _____

Handbook last updated (date) _____ 1/9/2017 _____

Lycée Franco-Américain International School

PAYMENT PLAN AGREEMENT

Please submit a payment plan agreement each school year

| Student's name | Grade | e-mail |
|----------------|-------|--------|
|----------------|-------|--------|

I have chosen the following payment plan:

- Option 1: Yearly payment a onetime payment of tuition in full due June 1st expires June 5th.**
- Option 2: Quarterly payment with a 5% finance charge, due on August 1st, November 1st, and February 1st**
- Option 3: Monthly Tuition payment plan option with a 7% finance charge 10 monthly payments due on the 1st of each month from August 1st – May 1st.**

There will be a \$75 late fee for all payments made after the 5th of the month and 15% of the balance for all payments made after the 15th of the month.

PAYMENT PLANS WILL BE ESTABLISHED FOR ALL CURRENT YEAR CHARGES. PAYMENT PLAN ARRANGEMENTS SHOULD NOT BE MADE UNTIL REGISTRATION IS FULLY COMPLETE. Any charges incurred after this plan is established including charges for additional activities or services added must be paid separately by the published due date or date of registration if they occur after tuition deadline. **NO AMENDMENTS TO THE PLAN WILL BE ACCEPTED.**

- I promise to pay Lycee Franco-Américain International School all payments detailed in this payment agreement by the established deadline.
- I understand that the payment agreement can be established for only one year.
- No School services (i.e., transcripts) will be granted if the payment is not received on time.
- No financial aid is applied until all aid has been finalized and all requirements have been met.
- I understand and agree that failure to pay all charges by the due date will leave my account subject to financial penalties, including collection and legal fees.
- I understand and agree that any payments made to the School will be credited first to any delinquent charges.
- I understand and agree that withdrawal from the School does not release me from this payment plan obligation, any financial penalties or other collection costs.
- At **30 days past due**, the entire payment plan balance will be accelerated (to a shorter term) and a late penalty of 15% of the outstanding balance will be assessed. The late penalty indicates that your account is past due. Unless you resolve the debt immediately, the School will advance the matter to the next step in the collection process, and your child may not be allowed to register for next year.

Lycée Franco-Américain International School

- Once an account is **60 days past due**, repayment arrangements may be made directly with the collection agency, and the account holder bears the costs associated with collection efforts. The cost associated with collection efforts is approximately 33.33% of the outstanding balance, which can add substantial additional charges. We encourage you to make payment in a timely manner and avoid financial penalties.
- The makers and endorsers of this agreement hereby waive protest, presentation, and notice of dishonor and hereby agree to remain bound for the payment of this agreement. The makers and endorsers of this agreement agree to pay all expenses incurred in the collection of this agreement.
- * **Please note: This is a binding contract.**

Name of Parent/Guardian

Signature of Parent/Guardian (required)

Date

Lycée Franco-Américain International School

LYCÉE FRANCO AMÉRICAIN PRICE LIST 2017-2018

Tuition for New Students

| Total Yearly | Option 1 | Option 2 | Option 3 |
|---|------------------------|-------------------------|------------------------|
| | <i>(One Payment)</i> | <i>(Three Payments)</i> | <i>(Ten Payments)</i> |
| | <i>Due June 1</i> | | |
| Preschool | \$10,000.00 | \$10,500.00 | \$10,700.00 |
| | <i>Deposit \$1,275</i> | <i>Deposit \$1,275</i> | <i>Deposit \$1,275</i> |
| <i>Per Period:</i> | <i>Expires June 5</i> | <u>3075.00</u> | <u>942.50</u> |
| Kindergarten | \$11,000.00 | \$11,550.00 | \$11,770.00 |
| | <i>Deposit \$1,700</i> | <i>Deposit \$1,700</i> | <i>Deposit \$1,700</i> |
| <i>Per Period:</i> | <i>Expires June 5</i> | <u>3283.33</u> | <u>1007.00</u> |
| Elementary | \$11,500.00 | \$12,075.00 | \$12,305.00 |
| | <i>Deposit \$1,800</i> | <i>Deposit \$1,800</i> | <i>Deposit \$1,800</i> |
| <i>Per Period:</i> | <i>Expires June 5</i> | <u>3425.00</u> | <u>1050.50</u> |
| Multi child discount: Second child: 10%. Three or more children: 15% | | | |

OTHER FEES:

Tuition Insurance is mandatory if payment is not made in full: \$200 for preschool; \$250 for Kindergarten and elementary. Due at registration time.

Parental Involvement (volunteer hours) \$10 per hour not completed. 20 hours are mandatory per family.

Evaluation Test for new student \$150 if not coming from an accredited French school ESOL or FLE (English or French as a foreign language) \$250 for the year.

MISCELLANEOUS FEES:

Meals \$6 per day, \$7 if ordered same day (prices subject to change)

Late payment fees: \$75 for payments made after the 5th of the month. 15% of the balance for payments made after the 15th of the month (auto charged).

Returned check fee: \$35.00

Before school for all grades \$150/month or \$12/day

After school fee \$150/month or \$12/day.

Preschool 4:30-6 pm, Kinder and Elementary 4- 6 pm

Before and after school \$200/month or \$15/day

Late pick up fee \$5/minute (after 6:05 pm)

Lycée Franco-Américain International School

PAYMENTS:

Option 1 (one payment) Onetime payment due on June 1st, payment option expires on June 5th.

Option 2 (three payments) payments are due August 1, November 1, and February 1.

Option 3 (ten payments), the first monthly payment is due August 1 and last payment due May 1.

Monthly payments are due the first day of each month.

RETURNING STUDENTS:

Registration fee for returning students is due February 15, and is non-refundable. There will be an additional \$100 fee for returning students registering after February 15, if there are still spaces available.

NEW STUDENTS:

Registration for new students begins February 16, fees are non-refundable.

There will be an additional \$100 fee for new students registering after March 15.

EQUIPMENT REQUIRED:

Students 3rd-5th grade need a tablet (iPad suggested). If not provided by parents, the school will charge \$25 per month to provide an iPad.

SCHOLARSHIPS: Please check our website www.lyceefrancoam.org for more information.

Parent/Guardian's signature

Date