



ACADEMICA

INTERNATIONAL
STUDIES

Registration Check List

- Registration Form
 - Birth Certificate (original)
 - Birth certificate verification
 - Immunizations and Physical
 - Registering Parent's Drivers' License
 - Copy to be filed
- 2 forms of Address Verification
- Transcript Request/ Records release
 - Transcripts
- Parent Contract
- Parent/ Student Handbook

APPLICATION FOR 2021-2022

Grade: ___ (2021-2022 School Year)

Student Name (Last, First, Middle): _____

Gender: _____ Date of Birth (DD/MM/YYYY): _____

E-mail Address: _____

Mailing Address (Street, City, State, Zip): _____

Phone Type (i.e. cell, home, etc.): _____ Phone Number: _____

Parent/Guardian Name: _____

Parent/Guardian Email: _____

Parent/Guardian Phone Number: _____

Term of Registration (Circle): **Fall Spring Summer** Year of Registration: _____

ACKNOWLEDGEMENTS

We, the undersigned, hereby certify that the above information is true and complete to the best of our knowledge. We agree to abide by and be subject to all policies of Academica International Studies ("AIS"), including but not limited to those policies outlined in the AIS Student-Parent Handbook, as amended. We understand that AIS may terminate the student's enrollment (without refund of tuition/fees) if the student fails to comply with AIS's attendance, academic, and financial requirements, or if the student disrupts the normal activities of the institution or otherwise fails to comply with AIS policies. We understand that the student must maintain satisfactory academic progress as described in the Student-Parent Handbook and that all financial obligations to AIS must be paid in full before grades can be issued or a degree will be awarded.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

TUITION AND FEES POLICIES

Academica International Studies ("AIS") agrees to offer educational services in accordance with AIS's policies, including but not limited to those outlined in this Tuition and Fees Policies document.

Student Name: _____ **Academic Year:** _____ - _____

Payments Due

1. Registration Fee (non-refundable and non-transferrable)

Total Amount Due: _____ Paid By (Circle): **Cash** **Check #** _____

Payment Due by August 1 of the Academic Year

2. Tuition

Total Amount Due: _____ Paid By (Circle): **Cash** **Check #** _____

Payment Due Either By (Select One With an "X"):

_____ 100% Paid by August 1 of the Academic Year ("Full Option")

_____ 50% Paid by August 1 and 50% Paid by January 1 ("Installment Option")

**Late Registration Fee or Tuition payments, and/or payments by check that are returned due to insufficient funds, are subject to a 1.5% processing fee.

Tuition and Fees Policies

A full tuition refund shall be paid if the student withdraws within thirty (30) days following the first day of classes (but the non-refundable Registration Fee shall not be returned). No refunds shall be paid on any tuition payments paid to AIS following this 30-day period. If the student's tuition is paid using the Installment Option, no refunds shall be paid on the second tuition payment in the academic year after thirty (30) days following the start of the spring semester. Tuition payments that are in arrears by thirty (30) days or more may result in the student's dismissal from AIS until all accounts are brought up to date or alternative payment arrangements are agreed upon by the parties. Absences as a result of late payments are considered unexcused.

The undersigned agrees to the terms of these Tuition and Fees policies and hereby enrolls their student as a student in AIS for the above-written academic year. The undersigned agrees to pay the tuition and fees for their student as set forth in these Tuition and Fees Policies. **AIS also reserves the right, at its discretion, to seek legal action to enforce any unpaid payments by the undersigned and the undersigned shall pay all costs of collection including attorney's fees, court costs, and a fee of 25% of the balance due.** All financial obligations to AIS must be paid in full before grades can be issued or a degree will be awarded. AIS may terminate the student's enrollment (without refund of tuition and fees) if the student fails to comply with AIS's attendance, academic, and financial requirements, or if the student disrupts the normal activities of the institution or otherwise fails to comply with AIS's policies.

Parent or Guardian Signature

Date

Parent/Guardian Name (Print): _____



REQUEST FOR RELEASE OF RECORDS

Name of applicant: _____ Date of Birth: _____

Entering Grade: _____ Current School: _____

I/ We authorize the release of our child's records as requested by Academica International Studies. I/We release every person and or institution from any and all liability resulting from or pertaining to the furnishing or records, documents and other information provided to Academica International Studies for that purpose.

Parent/ Guardian Signature: _____ Date: _____

Records to be released:

9th grade:

- Most recent report card indicating conduct and effort grades for all past completed quarters
- Final 8th grade report card (End of school year)
- Final 7th grade report card
- Standardize Test Scores
- Discipline Records

10th- 12 grade:

- Official final transcripts of credits/ courses completed with the registrar's signature, school dry seal in a sealed envelope
- Most recent report card indicating conduct and effort grades for all past quarters
- Standardized test scores
- Discipline Records

The above listed documents and this completed form is to be released to:

Academica International Studies

6340 Sunset Drive

South Miami, FL 33143

This form and documents may also be scanned/ emailed to Jarauz@aveteaching.com by the releasing school. Your child's current school may make a record of this agreement as record to parent' permission.

School Releasing Records: _____ Date: _____

Registrar/ Secretary Name: _____

Signature of Registrar/ Secretary: _____



PARENT/GUARDIAN CONTRACT

I, the undersigned parent/guardian of _____, hereby agree to abide by the following policies and procedures of _____.

- **Academic Recovery:** If the School identifies your student as requiring additional instruction and/or remediation including but not limited to: mandatory tutoring, summer school, etc., attendance at and successful completion of same shall be required. Alternative and/or make-up sessions may be scheduled at the discretion of the administration.
- **Outstanding Fees:** Failure to pay all outstanding fees may result in the loss and/or suspension of extra-curricular activity privileges. Fees may include but shall not be limited to: lost books, late library fees, lunch accounts, before/after care fees, and any and all fees which may accrue in the normal course of the school year.
- **Internet and Media Use Policy:** No recording, either photographic or audio/visual in nature may be made on school property without the express authorization of the administration. No document or media existing now or in the future and which impacts the School and/or disrupts the learning environment, relating to the School, its staff or students, including but not limited to photographs, letters, yearbooks, and other material may be published in any public forum or media without the express authorization of the administration. Furthermore, the unauthorized use of the Academica International Studies name and/or any of its logos is expressly prohibited. For purposes of this section, the term "public forum or media includes but shall not be limited to publicly accessible websites and web forums, newspapers, print and other media sources.

We understand the policies set forth in this Academica International Studies Virtual Academy Parent/Guardian Contract and will abide by them. Failure to adhere to the policies as stated in the Parent/Guardian Contract will result in a violation of the contract.

Students Name: _____ **Grade:** _____

Date: _____ **Parent Name:** _____

X

Parent Signature

PARENT ACKNOWLEDGMENT FORM

We have read the Academica International Studies Virtual Academy Student/Parent Handbook and understand and agree to cooperate with all of the policies contained herein.

I understand the importance of this Handbook and agree to adhere to the policies and regulations of the Student /Parent Handbook. I understand that failure to follow school regulations and policies, will jeopardize student eligibility to register for the following academic year, and may result in dismissal from this virtual program.

Student Name _____ Student Signature _____

Parent/ Guardian Name _____ Parent/ Guardian Signature _____

Date

DIRECTIONS: Please print, sign, and date this form accordingly and email as an attachment to info@aveteaching.com.