

SMITH PREPARATORY ACADEMY

Registration Forms for Returning Guests 2019-2020



SMITH PREP

Please mail registration forms to
PO Box 521522
Longwood, FL 32752

You may also hand deliver forms at
742 Sanlando Rd.
Altamonte Springs, FL 32714

Registration Process

1. Complete and submit this registration form.
2. Initial, sign, and submit Student and Parent contracts.
3. Up to date immunization record(s) [original of form DH 680] and original of State of Florida School Entry Health Exam form(s), and legible copy of birth certificate(s) (if not already in file).
4. Initial, sign, and submit financial contract and make initial payment accordingly.
5. Once documents and payments are processed you will be notified via email of further steps in preparation for the start of the new school year.

Smith Preparatory Academy – Family Enrollment Form

Parent Information

Father's Name

Authorized Driver Yes No

Emergency Contact Yes No

Mother's Name

Authorized Driver Yes No

Emergency Contact Yes No

Street address

_____-_____-_____
Work phone

City State Zip

_____-_____-_____
Home phone

Who will be the primary contact? Father Mother

Preferred phone number _____ Preferred email address _____

Name of Student(s) Registering

1. _____

3. _____

2. _____

4. _____

Emergency Contact

Please provide a local, non-parent emergency contact in case a parent cannot be reached.

First and Last Name Relationship Phone Number

Driver Authorization

Please provide information for all persons (other than parents) who are authorized to pick up your student from SPA. Please include all carpool drivers, family members, and friends.

First and Last Name Relationship Phone Number

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Communication

_____ Please initial here to acknowledge that email and our school's software system are our primary forms of communication with parents and that you are responsible for reading and responding as needed to SPA communication.

If both parents will be employed outside the home, please explain how educational and childcare responsibilities will be met. _____

Parent Signatures: We hereby certify that the information provided on this registration form is true and correct.

Father's signature: _____ Date: _____

Mother's signature: _____ Date: _____

Smith Preparatory Academy – Student Enrollment Form

Complete one per student. Additional student enrollment forms may be downloaded at smithprep.com

Student's Name: _____ Prefers to be called: _____
Birthdate: ____ / ____ / ____ Age: _____ Gender: _____ Ethnicity: _____
Last 4 digits of S.S. #: _____ Student's email (7th grade and older): _____

Status

You may enroll your child as a student or guest. Guests must register with the county or enroll with another private school. Guests receive the same instruction and student life opportunities, but Smith Prep will not maintain records, provide curriculum counseling, or generate transcripts.

Select: Student Guest

If your child is enrolling as a Student you need to fill different registration forms and you are required to attend an orientation meeting with the Guidance Department. You will receive an email with available dates.

Programs

Check all that apply. Students in the Upper School Comprehensive program, mark the appropriate core program and the desired math and Latin classes.

Lower School Program	<input type="checkbox"/> Kindergarten	<input type="checkbox"/> 1/2 Grade	<input type="checkbox"/> 3/4 Grade	<input type="checkbox"/> 5/6 Grade	
Upper School Program	<input type="checkbox"/> 7/8 Grade	<input type="checkbox"/> 9 Grade	<input type="checkbox"/> 10 Grade	<input type="checkbox"/> 11 Grade	<input type="checkbox"/> 12 Grade
Math (Mon. & Wed.)	<input type="checkbox"/> Pre-algebra	<input type="checkbox"/> Algebra 1	<input type="checkbox"/> Algebra 2	<input type="checkbox"/> Geometry	
Latin (Mon. & Wed)		<input type="checkbox"/> Latin I	<input type="checkbox"/> Latin 2	<input type="checkbox"/> Latin 3	

Electives for 11th – 12th Grade (F = Fall, S = Spring)

Foundations of Western Civilization (F) Christian Expansion and Western Development (S)

Medical Record

Please list any medical problems and/or medications taken on a regular basis: _____

Please list any allergies, including allergies to food and medicine: _____

Has your child been diagnosed with disabilities or impairments that may adversely affect their academic performance? Yes No

Has your child been involved in disciplinary action, suspended, or expelled from a previous school? Yes No

Has your child ever had a problem caused by the use of drugs or alcohol? Yes No

If you answered yes to any of the questions above, please provide a full explanation on a separate sheet.

Office use only:

BC _____ IM _____ PH _____

Smith Preparatory Academy – Student Contract

Additional student applications may be downloaded at smithprep.com

All Upper School (7th - 12th grade) students are required to initial and sign the student contract. Up to three students may use this form.

Student Information

1. Name: _____ Grade: _____

2. Name: _____ Grade: _____

3. Name: _____ Grade: _____

Commitments

Please place your initials by each statement to indicate your assent.

1. ____ / 2. ____ / 3. ____ I commit to strive for excellence in all I do and to abide by biblical standards of conduct both in and out of school.

1. ____ / 2. ____ / 3. ____ I commit to cooperate respectfully with all representatives of the Smith Prep faculty and of the church which hosts Smith Prep.

1. ____ / 2. ____ / 3. ____ I commit to submit respectfully to all Smith Prep policies, including those governing conduct and dress code. Please refer to the Smith Prep Family Handbook for details.

1. Student signature: _____ Date: _____

2. Student signature: _____ Date: _____

3. Student signature: _____ Date: _____

PARENT COMMITMENT

We commit to uphold biblical standards of conduct for our family in and out of school. We agree that adults, as well as students, should uphold a dress code of modesty and an attitude of respect at all school activities and events.

Father signature: _____ Date: _____

Mother signature: _____ Date: _____

Smith Preparatory Academy – Parent Contract for Guest Students

Use this form if your child/children will be enrolled as a **guest(s)** with Smith Prep. SPA will issue grades but will not hold records, issue transcripts, or provide curriculum and credit counseling for guest students. If you would like to know more about enrolling as a private school student, please contact the office

Parent Information

Print Father/Guardian's Name

Print Mother/Guardian's Name

Commitments and Acknowledgements

Parents/guardians: Please place your initials by each statement to indicate your assent.

Commitments and Acknowledgements

____ / ____ My/Our child(ren) are enrolled with an official private institution, or county where their school records are maintained.

____ / ____ I/We understand that our child(ren) will be participating in group classes as scheduled and that SPA will issue grades ONLY. SPA will neither hold academic records nor provide academic advisement.

____ / ____ I/We understand that SPA may provide services that will not be available to our family at this level of participation. Guest Students will not be provided with the following services: record keeping, curriculum counseling, standardized testing (grades 4-10), and/or portfolio review (grades K-3) credit advising, accredited diploma, graduation ceremony, official transcripts, dual enrollment options, Florida Bright Futures and scholarship documentation.

____ / ____ I/We commit to our responsibilities, as parents, to ensure that the formal education begun in the classroom is continued at home by:

- Reviewing all assignments sent home on a weekly basis
- Using the material sent home to teach our child throughout the week
- Assisting our child in the learning process
- Reviewing completed work to ensure our child is working to the best of his/her abilities
- Assisting our child in organizing his/her work to be submitted
- Reviewing all graded work sent home.

____ / ____ I/We have reviewed the Smith Prep Handbook and commit to support and comply with all policies as outlined therein.

____ / ____ I/We commit to having the immunization records and physical examinations up to date and submitted by August 10th, 2019

____ / ____ I/We commit to contact our child's teacher should any concerns arise.

____ / ____ I/We commit to bear any financial responsibility for any and all damages caused to school property by our child.

____ / ____ I/We hold harmless Smith Prep from any and all claims of liability resulting from services provided or not provided, errors, omissions, or referrals made by SPA.

____ / ____ I/We consent to my child's image possibly appearing on SPA social media accounts and/or marketing media.

Withdrawal of a Guest Student Initiated by Parents

____ / ____ I/We will immediately contact the admissions office and inform them of our intent in writing.

____ / ____ I/We understand that from the time of registration until June 30th we are allowed to drop from classes or enrollment only being responsible for application and enrollment fees. We understand that withdrawal any time after June 30th will result in the entire school balance being due, as teachers have been hired and classes confirmed with the understanding that my student(s) would be a part of the organization.

____ / ____ I/We will participate in an exit interview with a member of the administration.

Withdrawal of a Guest Student Initiated by Administration

____ / ____ I/We understand that failure to comply with SPA's policies and procedures are cause for dismissal with no refund of monies and the balance for year due. (See SPA Family Handbook Financial Policies & Agreement, and Code of Conduct.)

____ / ____ I/We understand that failure to keep up with the academic work, chronic absence or tardiness, unruly behavior, or unpaid fees are among reasons for dismissal from the SPA Guest Student program.

____ / ____ I/We understand that our child may be removed from enrollment, or enrollment denied or rescinded, at the discretion of the School Administration.

We hereby certify that the answers and information on these forms are true and correct. We understand and agree that we will meet and maintain all the requirements of and abide by the policies and philosophy of education of Smith Preparatory Academy. We enter into this contract for Guest enrollment with full understanding of our obligations and responsibilities. We understand and agree that negligence of these responsibilities may result in dismissal from Smith Prep without refund; and that reinstatement is dependent upon reaffirmation to these standards, repayment of applicable fees, and acceptance by the Administration. We agree that any photos/videos taken of our family members at any Smith Prep events may be used for promotional purposes. We release, hold harmless, and indemnify Smith Preparatory Academy from any and all claims for loss, damage, and/or injury of any nature to any person or property resulting from Smith Prep's programs or activities. We have read the Smith Preparatory Academy Family Handbook, and we agree to abide by all of the policies. We have retained a copy of this document for our records and reference:

Father/Guardian's Signature _____ Date _____

Mother/Guardian's Signature _____ Date _____

Smith Preparatory Academy – Financial Contract

Payment Options

Both parents please initial by your preferred payment option for 2019-2020.

____ / ____ **Option One: Tuition is paid annually by July 1, 2019.** There will be a \$100.00 discount of the annual tuition per family when tuition is paid in full by May 15, 2019. This discount does not apply to Math, Latin, Yearbook, or students receiving the sibling discount.

____ / ____ **Option Two: Tuition is paid in two (2) equal semester installments by July 1 and December 1, 2019** There will be an administrative fee of \$150 applied to each family's account and divided between the two semester payments.

____ / ____ **Option Three: Tuition is paid in ten (10) monthly installments beginning July 1, 2019 and ending with the April 1, 2020 payment.** There will be an administrative fee of \$150 year applied to each family's account for this option and divided equally among the ten payments.

Method of Payment

Acceptable methods of payment include personal check, cash, pre-arranged bank draft, or a debit or credit card through the online School Software system. All families selecting Option Two or Three above must provide SPA with a valid debit or credit card account in the case of non-payment by the scheduled due date.

Financial Policies

Both parents please initial each line below indicating that you have read, understood, and agreed to the policy.

____ / ____ I/We understand that enrollment fees are charged per student, reserve a student's space at Smith Preparatory Academy, and are non-refundable at any time for any reason. Enrollment fees paid in the spring for the upcoming school year are placed on the family account.

____ / ____ I/We understand that annual tuition pays for the cost of instruction in the SPA Program, books, supplies, and other operational expenses at Smith Prep. We understand that all non- consumable books will remain the property of SPA and that students will retain all consumable books and materials. In addition to tuition and fees, families are required to purchase a school uniform, as well as common student school supplies. Other optional items/activities will be paid during the school year as a family chooses. These may include field trips, workshops, school portraits, yearbook, school jackets, missions support, and our annual yearbook fund raiser. Participation in any extra-curricular activities that may be offered is optional, not mandatory.

____ / ____ I/We understand that ONLY Tuition Payment Options Two & Three will be given a six day grace period. Payments not received in the school office or paid online by credit or debit card before the 7th of the month will be charged a \$25.00 late fee per student. Families who choose Option One but miss the payment deadline will automatically be moved to the next payment option. Students are subject to being suspended from classes if an account is not up to date. (See Missing a Tuition Deadline in your Smith Prep Handbook for details.)

____ / ____ I/We understand that if a payment is not received in our office by the 25th of the month it is due, SPA reserves the right to charge the tuition payment, plus late fees incurred, to the debit or credit card provided above.

____ / ____ I/We understand that any checks returned to SPA for non-sufficient funds will have a \$35 fee assessed to our SPA account. (If two checks are returned, the account will be placed on a cash-only basis.)

____ / ____ I/We understand that if we withdraw our student(s) at any time, we are liable for all tuition for the full school year. (Please see details on Withdrawal Policy in the SPA Handbook for exceptions).

____ / ____ I/We understand that if our financial account is not current at the close of any semester, grades and records will be withheld until the account is settled.

____ / ____ I/We understand that from the time of registration until June 30th we are allowed to drop from classes or enrollment only being responsible for application and enrollment fees. We understand that withdrawal any time after June 30th will result in the entire school balance being due, as teachers have been hired and classes confirmed with the understanding that my student(s) would be a part of the organization.

I/We have read the complete Financial Options and Policies for Smith Preparatory Academy, and we agree to abide by all of the Financial Policies. We have retained a copy of this document for our records and reference:

Father/Guardian's Signature

Date

Mother/Guardian's Signature

Date

Additional Financially Responsible Adult (Optional)

Date

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Smith Preparatory Academy – Tentative Course Plan

Complete one per student. Additional Tentative Course Plans may be downloaded at smithprep.com

If your child will be a Smith Prep Student in 7th through 12th grade, please fill out and submit this tentative course plan in preparation for your consultation with the Guidance Department. Please retain a copy of this form for your records.

Student Information

Name Grade

Course Plan

This form aids our advisors in assisting you with credit planning at your consultation. Please provide as complete a plan as possible. If you are still deciding on a course, list it with a note to discuss further at the consultation.

Check All That Apply

- Smith Prep Level 7/8 Grade 9 Grade 10 Grade 11 Grade 12 Grade
Smith Prep Math Pre-Algebra Algebra 1 Algebra 2 Geometry
Smith Prep Latin Latin 1 Latin 2 Latin 3

Electives for 11th – 12th Grade (F = Fall, S = Spring)

- Foundations of Western Civilization (F) Christian Expansion and Western Development (S)

Non-Smith Prep Classes

Instructors may be a parent, group class (give name of group/school), video or online course, private tutor, dual enrollment, etc.

Indicate whether the course will be taken for full or half credit. Smith Prep high school students are expected to earn a minimum of six credits per high school year and enroll for no more than nine.

_____ Course Title	_____ Publisher/Curriculum	_____ Instructor	_____ Credits
_____ Course Title	_____ Publisher/Curriculum	_____ Instructor	_____ Credits
_____ Course Title	_____ Publisher/Curriculum	_____ Instructor	_____ Credits
_____ Course Title	_____ Publisher/Curriculum	_____ Instructor	_____ Credits

Note plans for volunteer service or extra-curricular activities for the upcoming school year: _____

