

SUMMER SCHOOL REGISTRATION FORM 2023

SUMMER SCHOOL ALEXANDER ACADEMY	Monday, July 3 – July 28, 2022
Morning class: 8:30am – 12:30pm	Afternoon class: 1:15pm – 5:15pm
First Name	Last Name

REGISTRATION CHECKLIST Step 1	COURSE SELECTION: Note: Courses only run if there is enough student interest, and teacher availability. Class time (morning or afternoon) will be determined and announced at a later date once the schedule is finalized.		
□ Completed Registration Form For students not studying at Alexander Academy:			dule is finalized.
 □ Copy of most recent report card □ Copy of birth certificate or passport □ Copy of study permit (for international students) □ Proof of active medical insurance 	Foundations of Math & Precalculus 10	Composition 10 & Literary Studies 10	Science 10
Step 2 (Students not currently studying at Alexander Academy) Submit completed registration package by email to admissions@alexanderacademy.ca . Summer school fees can be paid at the Finance Office (204), or you can request online payment through the Admissions Officer. Please retain Receipt of Payment.	Foundations of Math 11	Composition 11	Chemistry 11
	Pre-calculus 11	Social Studies 10	Life Sciences 11
Course Fees: \$100 – Application fee (waived for Alexander Academy students) \$1800 – Tuition fee for international students (OR) \$1200 – Tuition fee for domestic students (Canadians / permanent residents)	Pre-calculus 12	Career Life Education	Economic Theory 12
Step 3 (Alexander Academy Students) Go to the Student Services Office 205 and submit the Registration	Transitional English	Physical Health Education 10	Contemporary Indigenous Studies 12
Form and Receipt of Payment to Ms. Guan.			

COURSES REQUESTED		
Course Request #1:	Back up choice #1:	
Course Request #2: Note: Each course is 4 hours per day, so taking 2 courses would mean attending class for 8 hours per day, and you would pay 2 course fees.	Back up choice #2:	

Page 2		Student Name:
you are currently attending Alexander	ider Academy, continue with page 2 of this for Academy, proceed to page 3 directly.	rm.
TUDENT INFORMATION irst & Middle Names	Last Name (family name)	Nickname, if applicable
iist & Middle Mariles	Last Name (family name)	Межнате, п аррпсавте
Date of Birth (YYYY/MM/DD)	Gender □ Male □ Female	Country of Citizenship
Student's Email	Student's Telephone Number	Personal Education Number (PEN)
Mailing Address (& apartment #)	City	Postal Code
LANGUAGE REQUIREMENT		
All international students will be requir	red to demonstrate language proficiency throu	
All international students will be requir What is the most recent English class th	nat you have passed?	- · :
All international students will be requir What is the most recent English class the Note: Students who are not currently s	nat you have passed?tudying at Alexander Academy will need to su	- · :
All international students will be requir What is the most recent English class the Note: Students who are not currently structure.	nat you have passed?tudying at Alexander Academy will need to su	bmit their most recent report card.
All international students will be requir What is the most recent English class the Note: Students who are not currently students.	nat you have passed?tudying at Alexander Academy will need to su	- · :
All international students will be requir What is the most recent English class the Note: Students who are not currently structure. FULL-TIME SCHOOL INFORM School Name	nat you have passed?	bmit their most recent report card.
What is the most recent English class the Note: Students who are not currently sufficiently School Name FAMILY INFORMATION AND	nat you have passed?	bmit their most recent report card.
All international students will be requir What is the most recent English class the Note: Students who are not currently structured by School Name FAMILY INFORMATION AND	MATION City EMERGENCY CONTACT	bmit their most recent report card.

MEDICAL INFORMATION		
Insurance coverage policy number:	Allergies or medications:	
	□ No □ Yes Please specify:	
Insurance expiry date:		
I/we the parents / guardian give consent to administer any medical treatment deemed necessary by a licensed physician and the transfer of my child to any hospital reasonably accessible. I understand and agree that Alexander Academy does not assume responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment.		
Signature of parent / guardian:	Date:	

Phone #1

Phone #2

Last Name (family name)

First Name

Relationship to student

ATTENDANCE POLICY		
Students are required to attend classes every day and are required to complete all than 3 days will NOT BE PERMITTED to continue taking the course AND will be with fees. For students who are late for 20 minutes or more for 3 times, this will count a	drawn from the course without a refund of	
I understand the attendance policy and agree to arrive on time to class each day.		
Signature of student:	Date:	
Signature of parent/guardian:	Date:	
REFUND POLICY		
Keep your Receipt of Payment in order to get your money refunded if your request you decide not to take a Summer School course. Students can get a full refund before courses start on July 3 rd , only partial refunds will be available until July 7th (per day administrative fee. There are no refunds after July 7th, or if a student is expelled for I fully understand the refund policy. Signature of student:	ore July 3 rd , 2023. After Summer School or rate divided by 20 days), minus a \$100 from Summer School. Date:	
Signature of parent/guardian:	Date:	
Alexander Academy has pride in its school, students, faculty, and staff. Our goal is to provide a safe and nurturing learning environment for all members of the school community. We expect our students and parents to demonstrate care and respect for the safety and well-being of others, and to maintain integrity in their studies. This includes adherence to the full Code of Conduct as well as standards of academic honesty. In serious and/or persistent cases of misconduct, the Academy reserves the right to remove a student from classes and/or require that a student withdraw, at any time during the course, without eligibility for a refund of tuition fees. I understand and support the Academy's standards of academic honesty and respect for the well-being of all other members of the school		
community.	· ·	
Signature of student:	Date:	
Signature of parent/ guardian:	Date:	

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Student Name: _____