

### **WELCOME TO YOUR APPLICATION FOR THINKschool!**

In the following pages, you will find all of the most important details, so **please read carefully.** In order to confirm your seat for 2024-25, this application and a \$500 registration fee must be submitted alongside your application. The registration fee is fully refundable should you decide against accepting an offer of enrollment.

If enrolled, the registration fee is later applied to your tuition balance if you enroll with us.

Once your application is filled in, please email a copy to us to:

## WeAreThinkSchool@gmail.com

### WE DO NOT ACCEPT PAPER COPIES OF ANY DOCUMENTS!

You can contact us via email with any questions, comments, etc., or schedule a direct phone call with us. The best number to reach us at for general inquiries is 347-973-9807. You can contact us via email with any questions, comments, etc., or schedule a direct phone call with us. The best number to call/text us at for general inquiries is 212-829-3516.

By enrolling your child in the 2024-25 school year at THINKschool, you are committing to pay for the entire school year, September – June, even if you decide to leave before the conclusion of the year.

There are no exceptions here under any circumstances.

#### **TUITION BREAKDOWN**

School tuition will be paid monthly for the 2024-25 school year.

THINKschool strives to keep our tuition rates low. Our program does not receive governmental assistance and is not subsidized by any outside organizations. Prompt payment of tuition is vital and essential for the ongoing operation of THINKschool.

#### TUITION

School tuition: \$12,500 annually (\$1,250 monthly)

After-school: \$3,750 annually (\$375 monthly) (FREE for kindergarten)

4:00 - 6:30 pm includes 1 snack

### Meal plan:

\$2,750 annually (\$275 monthly) includes hot lunch and 2 snacks daily

All tuition payments for the school year will then be due on the 1st of the month, paid ahead of time Ex. On August 1, 2024, September tuition is due; On September 1, 2024, October tuition is due; etc.

Optional Additions. Please check what you are interested in.

Meal Plan - \$275 monthly After-School - \$375 monthly

This form must be submitted alongside your registration fee, which is \$500. The registration fee secures your spot until your parent/student interview. If offered admission, your deposit of \$1,500 is due. Deposits are non-refundable under any circumstances so please be sure that you are ready to commit prior to submitting your deposit. Due to the small and limited nature of our school, we cannot hold spots without a deposit when there is interest in that seat for another student. Thank you for understanding.

The registration fee is credited towards your tuition balance. The deposit, however, is held until the last month of school and applied to that month's tuition (June 2025.) Tuition payments are due promptly by the 1st of each month, paid a month ahead. Please understand that tuition payments help us continuously run the school, pay our staff, and provide materials and additional tools for your child's success. Late payments are subject to additional charges and missed payments may result in your child not being able to attend classes until a balance is paid off.

A student's registration	packet will be	considered	complete w	then if contains	the following
documents:					

Tuition Agreement
Medical Form
Parent Involvement Contract
Health Examination form

### **Basic Student Information**

Student's First Name:	Last Name:	Sex:	F	M
Date of Birth:	Grade Level Registering for:			_
Student's Home Address:				
Last School/Day Care Atte	ended:			_
Was the student allowed to	o re-enroll in the previous school?			
If no, please explain:				
Did the student fail any clo	asses the previous years?			
If yes, please explain:				
Has the student ever repea	ated or skipped a grade?			
If yes, please explain:				
Has the student ever been	homeschooled?			
If yes, what grades?				_
Does the student have any	y learning difficulties?			
If yes, please explain:				
ADD/ADHD, SLD, Hearing, If yes, discuss the results with	professionally tested for one of the following: Vision, Speech, or any other? th us directly and include a copy of the report.  not determine an enrollment decision based on these.			
Has the student ever been	suspended from school?			
If yes, please explain:				
Has the student ever been	expelled from school?			
If yes, please explain:				
Has the student had a beh	navioral problem?			
If yes, please explain:				
Does the student have acc	cess to appropriate research materials such as internet acc	ess?		
Yes No				

### **Basic Parent Information**

# Parent 1: Full legal Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Address if different from student's: Email: \_\_\_\_\_\_ College attended & Degree Earned: Parent 2: Full legal Name: \_\_\_\_\_ Occupation: \_\_\_\_\_ Place of Employment: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Address if different from student's: \_\_\_\_\_\_ Email: College attended & Degree Earned: **Emergency Contacts:** Please list two people other than parents: **Emergency Contact 1:** Name: \_\_\_\_\_\_ Relationship to student: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ **Emergency Contact 2:** Name: \_\_\_\_\_\_ Relationship to student:\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### **Medical Release Form**

Student's Full Name:  Does the student have any medical conditions that would prohibit full participation in courses or athletic programs throughout the school year?					
					f yes, please explain:
Student's physician information:					
Full Name:	Phone Number:				
Address:					
true. As indicated by my signature emergency treatment of my mind be deemed necessary. This shall is treatment and/or hospital care of licensed to practice medicine in responsible for any cost incurred the health insurance to students. This I understand that additional med compliant with all New York City/S	n this release form is, to the best of my knowledge, accurate and e below, I authorize THINKschool and all personnel to consent to any or child,, which shall in my absence nclude examination, anesthesia, medical diagnosis, surgery, or f the minor child and upon the advice of a physician or surgeon the United States of America. I acknowledge that I will be by this treatment. I understand that THINKschool does not provide authorization shall be valid during the 2024-25 school year only. ical consents may be sent with the secondary registration form in State regulations and requirements.				
Signature of parent/guardian	 Date				

### THINKschool Financial Contract 2024-25 School Year

Parent Last Name:	First Name:	M.I.:
Parent Last Name:	First Name:	M.l.:
Billing Address:		
Parent 1 Phone:	Parent 2 Phone:	
E-mail:		
Signature:	Date:	
THIN	Kschool Admissions Agreemer	nt
<ul> <li>Parents or guardians are responsil</li> <li>Cash, check, credit card, Venmo transaction received an addition</li> <li>In order for report cards, transcrip can be NO OUTSTANDING BALAN</li> </ul>	t, or any other documentation stating prod	epted. Each credit card of of work to be issued, there
responsible for paying the remain	der of the year's tuition. There are no exce	eptions to this policy.
<mark>I understan</mark>	d and agree. Signature:	
<ul> <li>All parents/guardians and studenthroughout the entirety of the prostudents and parents/guardians of the triangle of the prostudents and parents/guardians of the triangle of triangle of triangle of triangle of the triangle of triangle of</li></ul>	ent/Guardian and Student Conduct Policy ts must comply with the rules and regulation or gram.  will be respectful of the teachers and admit expel any student whose parent/guardian tently disobeys the rules and regulations. Holicy for misconduct, bullying, and failure the conduct policies or fail to meet acade the discretion of the administration with no	inistration. (or student themselves) displays to meet academic standards. emic expectations of

### l understand and agree. Signature: \_\_\_\_\_\_

### **Attendance Policy**

- Attendance to scheduled classes is mandatory.
- Parents/guardians must contact management if the student is going to be absent for any reason.
- The parents/guardians will be responsible for contacting all of his/her teachers in order to obtain the homework assignments for the days missed.
- Late work during the grading period is penalized.
- Should a student fa return to class and
- Any student display must come pick the

all ill for any reason during the program, a medical note explaining that they are fit to				
do not pose a risk of spreading any illness will be required.				
ying <b>any</b> potential symptoms will be asked to leave immediately and a parent/guardia	ın			
em up if called. We also reserve the right to request a Covid test when warranted.				
l understand and agree. Signature:				

### **School Arrival/Departure Policies**

- Parents/guardians will drop off and pick up students on time. Any student who is consistently not picked up
  on time at the end of the program selected is subject to additional charges.
- As an attempt to limit spread, risk of infection, and safety of students and staff, parents/guardians are not and will not be permitted to enter the premises.

l understand and agree.	Signature:	

#### Media Release

I hereby give permission for my child to be photographed/videod as part of routine throughout the year. I understand that this media may be used to keep a journal of activities, to share during power point presentations and/or reports to our donors and for promotional purposes including flyers, brochures, newspaper and on the internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all media is the property of THINKschool and its affiliates.

Child's Name:	Parent's/Guardian's Name Printed:
Parent's/Guardian's Signature:	Date:

### **Parental Involvement Contract**

As parents/Guardians of a THINKschool student, you are required to adhere to our parental involvement guidelines throughout the entirety of your time enrolled. By enrolling your child in our program, you commit to serve as collaborators with the faculty, administration, and students to achieve excellence in the educational goals for our students through academic, social, moral, and civic engagement

- ☐ In order to stay connected with your child's school experience, you agree to *check* daily for updates on your child's behavior and performance. You also agree to be informed of your child's homework, grades, and any other announcements from the program/your child's teacher.
- ☐ Support the school's conduct codes and policies. Review this with your child so they can manage themselves during the day.
- ☐ Encourage a minimum of 15-30 minutes of daily reading at home. Log completed books in the student's reading journal.
- □ Set the bar high for your child to reach success and communicate your clear expectations for academic success. Support daily classwork, homework, and projects, ensuring completeness to the best of the child's ability. Please note that in order to receive a passing grade and credit for each semester's classes, students must achieve at least a B+ in each class. Should a student be at risk of not meeting this requirement, a meeting with the parents will be set to discuss additional options.
- ☐ Attend each parent-teacher conference throughout the program to discuss your student's progress, typically held once/semester.
- ☐ Submit updated student and parent information to the office within seven calendar days of any changes.

### **Additional Policies and Reminders**

Please note that the safety of your child is of the utmost importance to us and our policies are in place for strictly that purpose. We appreciate your understanding and trust!

We take bullying and uncontrollable behavior very seriously. We will collectively attempt several solutions and/or mediations, however, should none of our efforts work, we will be forced to proceed with expulsion procedures. If an issue arises and continues with no resolution, the child will be asked to leave the program with no refund. If a child consistently displays poor behavior, breaks the rules, becomes incompliant to our rules and regulations, or poses harm to other students or staff, the child will

Children are not permitted to bring any electronics or valuables to the program. Children are likewise
not permitted to bring in any toys from home. Any such belongings will be taken away and held until
pick-up at which time they will be given back to the parent/guardian with a warning.

- ☐ Should there be any presentation of illness, or failure to comply with hygiene regulations, your child will be sent home for the day. You will receive a one-time warning regarding the cleanliness and hygiene requirements. If a child consistently arrives to the program having broken these requirements, you may be asked to leave the program with no refund.
- ☐ Each child **must** have all required texts and materials throughout the program. These get sent home on days that homework is assigned in any of these, but must be returned the following day. Children consistently missing homework and other assignments will result in a meeting with the parents. We keep our homework load light, but it is an integral part of our program.

Please sign below to assure that you have read, understood, and agree to these policies.

be asked to leave the program with no refund.

Child's Full Name:		
Parent's Full Name:		
Signature_	Date:	/ /