



2023 - 2024

NHTC

ENROLLMENT APPLICATION

NORTHSHORE HOMESCHOOLING & TUTORING CENTER

ENROLLMENT APPLICATION

SCHOOL YEAR 2023 - 2024

Student's Full Name: _____

___ Male ___ Female ___/___/___ ___/___/___ _____
Date of Birth Student's Social Security Number Grade

Address: _____
Street City State Zip Code

Parent/Guardian Information:

Name: _____ Email: _____

Address: _____
Street City State Zip Code

Home phone: _____ Cell: _____

Employer: _____ Work phone: _____

Name: _____ Email: _____

Address: _____
Street City State Zip Code

Home phone: _____ Cell: _____

Employer: _____ Work phone: _____

Family Status:

- Married
- Separated
- Divorced
- Single Parent
- Student Adopted
- Mother Remarried
- Father Remarried
- Mother Deceased
- Father Deceased

Members of the Household:

Parents _____

Siblings _____

Other Adults _____

PREVIOUS SCHOOL

DATES OF ENROLLMENT

Has your child had any specialized tests or evaluations? If so, please list.

Test/Evaluation_____ Administered by_____ Date_____

Test/Evaluation_____ Administered by_____ Date_____

Has your child received tutoring or private treatment? If so, please describe.

HEALTH:

Does your child have any allergies? If so, please list and include a note from the doctor with specific guidelines.

Does your child have any physical limitations which would limit participation in the full range of school activities? If so, please describe.

Is your child currently receiving any medication? If so, please list.

Has your child ever had a serious illness, injury, or hospitalization? If so, please describe.

Northshore Homeschooling & Tutoring Center does not discriminate in its admissions or administrative & educational policies, or other school-administered programs and activities on the basis of race, color, creed, sex, ancestry, handicapping condition, national or ethnic origin, religion, or sexual

STUDENT RELEASE INFORMATION:

Student's Name

The following individuals are permitted to pick up my child from school:

NAME _____ Relationship _____

Cell _____ Work _____ Home Phone _____

NAME _____ Relationship _____

Cell _____ Work _____ Home Phone _____

NAME _____ Relationship _____

Cell _____ Work _____ Home Phone _____

I understand that it is my responsibility to keep this list current.

Parent/Guardian Signature

Date

EMERGENCY CONTACT LIST

Student's Name

In case of an emergency, whom should we contact first?

Name _____ Relationship _____

Cell _____ Work _____ Home Phone _____

Other Emergency Contacts:

Name _____ Relationship _____

Cell _____ Work _____ Home Phone _____

Name _____ Relationship _____

Cell _____ Work _____ Home Phone _____

Name _____ Relationship _____

Cell _____ Work _____ Home Phone _____

I understand that it is my responsibility to keep this list current.

Parent/Guardian Signature

Date

Student's Name

I, the undersigned, hereby certify that I am the parent and/or the legal guardian of _____, age _____, and hereby grant Northshore Homeschooling & Tutoring Center, LLC., the right to publish or otherwise replicate pictures of him/her or pictures in which he or she may appear in or whole or part, for purpose of art, advertising, or any other lawful purpose (school newsletter, school Facebook page, etc.).

By my signature, I also certify that I have read and fully understand this agreement.

Parent/Guardian Signature

Date

NORTHSHORE HOMESCHOOLING & TUTORING CENTER

AUTHORIZATION FOR RELEASE OF RECORDS

School: _____ Teacher or advisor: _____

Address: _____

School Phone: _____ Fax: _____

On behalf of my child, _____, who is presently enrolled or was recently enrolled as a student at your school, I have applied for admission to Northshore Homeschooling & Tutoring Center beginning with the term starting _____, 20____. I hereby authorize you to release a complete copy of his/her file. Please include a transcript of his/her academic record, health forms, relevant test scores, teachers' comments, and observations of his/her overall development and progress.

Parent/Guardian Signature

Date

Please forward these records to:

Northshore Homeschooling & Tutoring Center
2300 West 21st Avenue, Suite A
Covington, LA 70433
985-264-5564
Northshorehtc@gmail.com

This is to confirm my intention to enroll _____ in the _____ program at Northshore Homeschooling & Tutoring Center, subject to the following terms:

Tuition

Paid in Full / Paid Monthly	\$6,000	\$600
(9:00-3:00) - Monday - Thursday	K	6th
Paid in Full / Paid Monthly	\$5,000	\$500
(9:00-3:00) - Tuesday - Thursday	7th	12th

1. A curriculum fee of **\$400.00** and a registration fee of **\$50.00** are due with this agreement. Receipt of these fees constitutes a contract that the student will attend Northshore HTC, LLC., for the year noted above. The curriculum fee and the registration fee is nonrefundable. Bank fee of \$45.00 will apply for NSF checks.

_____ Computer Rental fee of **\$25.00** (Optional) a month is due if your child is in need of using a schools computer.

2. It is understood that tuition may be paid in full with either cash, check, automatic bank draft, debit card or credit card or tuition may be paid monthly with automatic bank draft, debit card, cash or post-dated checks. Please check one of the following payment methods:

_____ I will pay tuition in full in the amount of _____ by July 1st with either cash, check, automatic bank draft, debit card or credit card.

_____ I will pay tuition monthly in the amount of _____ beginning August 1 and by the first of every month thereafter through May 1 with either automatic bank draft, debit cash, or post-dated checks.

3. In accepting this agreement, the undersigned accepts the responsibility for tuition for the full ten-month school year. There is no tuition reduction for holidays, school breaks, sicknesses, absences, or natural disasters. Tuition remains the same each month. The undersigned also understands that if payment is not received by the 5th of each month, an additional late charge of \$45 will be added to tuition. If payment has not been received by the 15th of the month, an additional 25% fee will be added to tuition. Northshore Homeschooling & Tutoring Center reserves the right to terminate the student’s enrollment if payments are not made by the agreed upon due dates. NHTC reserves the right to revoke the monthly

ENROLLMENT AND TUITION AGREEMENT (CONTINUED)

tuition payment option in cases of repeated late monthly payments. Furthermore, in cases where tuition is past due, the school will reserve the right to withhold records or transcripts. In cases of failure to pay, the parent or guardian who is responsible for payment agrees to pay, to the extent permitted by law, the school’s expenses of enforcement and collection, including attorney’s fees and costs. In case of withdrawal from the school, parents/ guardians will be charged a \$500 withdrawal fee and will receive a 50% refund of the unused portion of tuition whether paid monthly or in full. Bank fee of \$45.00 will apply for NSF checks.

4. Northshore Homeschooling & Tutoring Center reserves the right to terminate this contract if the student’s behavior or lack of cooperation is deemed unacceptable, if parents’/guardians’ behavior or lack of cooperation is deemed unacceptable, or if tuition payments are overdue. If NHTC exercises its right to terminate this contract, appropriate tuition rebates will be determined on a case-by-case basis.

It is further understood by the parents/guardians and Northshore Homeschooling & Tutoring Center that upon payment of the registration fee and the acceptance of the child into enrollment by Northshore Homeschooling & Tutoring Center that this contract will be binding to the parents guardians.

Parent/Guardian Signature

Date

Staff Signature and Date

Date

NORTHSHORE HOMESCHOOLING & TUTORING CENTER

MONTHLY TUITION PAYMENT INFORMATION

If paying monthly with a credit/debit card - Processing fee will apply

Name as it appears on card _____

Billing Address _____

Phone Number of cardholder _____

Type of Card (Visa, MasterCard, American Express, etc.) _____

Account Number _____

Expiration Date _____ CVC Number _____

If paying by check, 10 post-dated checks must be turned in with this agreement:

First check must be post-dated August 1st through May 1st.

If paying monthly through automatic bank draft:

Name as it appears on bank account _____

Billing Address _____

Phone number _____ Drivers License # _____

Routing Number _____ Account Number _____

This information will be entered in to our payment processing system and will be used to charge your monthly tuition payment. This information will be destroyed after it is entered; we do not keep any confidential financial information on file in the office.

EMERGENCY PROCEDURES

Student's Name _____

Louisiana State Licensing requires that all schools/child facilities have an evacuation plan in place. In the event of severe weather (such as tornado and hurricane warnings, possible street flooding, snow, etc.), it is the parents' responsibility to stay tuned to local media for weather reports and arrange for immediate pick up of their child. Parents who do not work near the school should arrange and authorize back up persons who would pick up their child immediately should a potentially dangerous situation arise.

Should the children have to evacuate due to an environmentally dangerous situation in the area, we will transport them in private vehicles to the nearest safe place. We will notify parents of exact location of destination via telephone emergency contact list and will post the exact location of destination on the door of Northshore Homeschooling & Tutoring Center.

Please complete and sign this emergency/evacuation authorization form.

In the event of the threat of severe weather or an environmentally dangerous situation, I will provide for immediate pick up of my child. Should civil authorities advise the NHTC staff of a possible environmental danger and order evacuation of the children, I authorize the staff members of Northshore Homeschooling & Tutoring Center or any parent volunteers to transport my child to the closest safe place in the area.

The following persons have agreed to pick up my child and have my authorization to do so:

_____	_____	_____
Name	Relationship	Phone #
_____	_____	_____
Name	Relationship	Phone #
_____	_____	_____
Name	Relationship	Phone #

I understand that it is my responsibility to keep this list current and to remain alert and prepared during threatening weather conditions.

_____	_____
Parent/Guardian Name (print)	Parent/Guardian Signature
_____	_____

Home Phone # _____ Cell # _____ Work # _____

DISCIPLINE POLICY

Student's Name _____

It is our goal to help instill peace, respect, and healthy conflict resolution in the children. Northshore Homeschooling & Tutoring Center assists children in meeting appropriate behavioral standards by first establishing clear rules and expectations. The children are made aware of class policies, and the teachers are consistent in their enforcement of them. Positive phrasing and reinforcement as well as natural consequences best help children see the direct correlation between their behavior and the result of their behavior. In this way, they quickly learn to consistently make good choices.

When a child's behavior is not appropriate (violence, inappropriate language, misuse of the materials, etc.), it is important that he is made accountable for his actions and that he understands how his behavior affects others. NHTC teachers will handle these situations in a firm yet respectful manner. They may briefly explain why the behavior is undesirable, help the child identify the reason for the behavior (frustration, anger, etc.), then offer an appropriate response for the child to execute in the future. Teachers may also relocate the child to another area of the building to do some other type of work or to simply take a break. If classroom materials are being misused or damaged, a teacher may prevent the child from using them until he demonstrates more self-control. Students may be asked to perform some type of community service during recess as a consequence. Corporal punishment is never used at NHTC.

Minor behavioral issues are usually handled in the classroom. If undesirable behavior becomes consistent or becomes a danger to the welfare of others, parent conferences will be held to determine suitable interventions. Parents are expected to cooperate with the school on meeting the child's behavioral needs. Failure to do so and to do so in a timely manner may jeopardize the child's enrollment. These situations will be handled on an individual, case-by-case basis. NHTC reserves the right to terminate the enrollment contract if the child's behavior does not improve in what is deemed a timely manner.

Any suspected and/or neglect of a child in school or the center must be reported in accordance with Louisiana Revised Statutes 14.403.

I have read and understand Northshore Homeschooling & Tutoring Center School's discipline policy.

Parent/Guardian Signature

Date

SICK POLICY

- Students should remain home and be fever-free for 24 hours after having a fever of 99.5 degrees or higher (per COVID-19 Memo).
- Rashes must be seen by a physician and a physician’s note must be sent to school with the child upon his return.
- Students must be free of diarrhea or vomiting for 24 hours before returning to school.
- Children with head lice must be nit-free and checked back into school through the office.
- Discolored (yellow or green) nasal discharge indicates a sinus infection, sickness, or allergies and requires a doctor’s note to return to school. This is a policy recommended by the State Health Department.
- Persistent cough must be seen by a physician and a note stating the child is not contagious is needed in order to return to school.
- Pink eye or any eye discharge must be seen by a physician and requires a doctor’s note to return to school.

Children will be sent home if any of the above conditions are evident or if children display any outward signs of illness. Please do not send your child to school if he is sick or if it is even a question. NHTC staff will not administer medication; please refer to the medication administration policy for additional information.

Your child must be picked up within an hour of communication regarding illness.

I understand that if my child, _____, is sick or exhibits any signs of the above symptoms he or she will not be able to return to school until all of the above conditions are met.

Parent/Guardian Signature

Date