

# The School of Literacy II

7415 S. East End Ave.

Chicago, IL 60649

## Registration Form

Return this completed application and non-refundable \$50.00 Application Fee for enrollment.

Applicant's Full Name: \_\_\_\_\_

Parent's Full Name: \_\_\_\_\_ Relationship \_\_\_\_\_

\_\_\_\_\_ Relationship \_\_\_\_\_

Home Address: \_\_\_\_\_

Gender: \_\_\_ M \_\_\_ F

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

\_\_\_\_\_

Languages Spoken at home: \_\_\_\_\_

Present Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Are there any nicknames you would prefer we not use with your child?

\_\_\_\_\_

Does your child have any health problems or allergies?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Where does your child sleep? Does he/she share a room/bed with anyone?

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Has your child been immunized? If so please attach most recent immunization forms or letter requesting waive.

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Parent's Status: \_\_\_ Married \_\_\_ Domestic Partners \_\_\_ Separated \_\_\_ Divorced \_\_\_  
Single \_\_\_ Widowed

First Parent's Name: \_\_\_\_\_  
First Middle Last

What does your child call this parent?

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Home Address (if different):

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Gender: \_\_\_ M \_\_\_ F

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

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Name & Address of Employer:

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Occupation/Position:

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Second Parent's Name:

\_\_\_\_\_

First Middle Last

What does your child call this parent? \_\_\_\_\_

Home Address (if different): \_\_\_\_\_

Gender: \_\_\_ M \_\_\_ F

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

Name & Address of Employer:

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Occupation/Position:

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

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Sibling's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

School: \_\_\_\_\_

Sibling's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

School: \_\_\_\_\_

Sibling's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_

School: \_\_\_\_\_

### Health Insurance Information:

Is your child under any medical insurance plan? \_\_\_\_\_

What is the medical carrier name? \_\_\_\_\_

Type of Plan \_\_\_\_\_ PPO \_\_\_\_\_ HMO \_\_\_\_\_ POS \_\_\_\_\_ Other

Who is the primary subscriber (Name) of the plan? \_\_\_\_\_

### Emergency Contact Information:

In the event of a medical emergency, I give The School of Literacy II and the agents that represent the institution the right to take my child to the nearest hospital or urgent care facility to service medical issues that are deemed urgent.

\_\_\_\_\_  
Parent Print Name

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent Print Name

\_\_\_\_\_  
Parent Signature

In the event of an emergency, I authorize the following adults to be contacted if I cannot be reached.

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Contact Phone

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Contact Phone

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Contact Phone

**Return this completed application and non-refundable \$50.00 Application Fee for enrollment.**

The following adults are authorized to pick or drop off my child to the Academy:

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Contact Phone

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Contact Phone

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
Contact Phone

# The School of Literacy II

7415 S. East End Ave.

X \_\_\_\_\_  
Parent Signature

Please list all schools/day care situations prior to this application.

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What is the reason for switching schools? Please attach other sheets if necessary.

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I authorize The School of Literacy II and agents of to administer medication to my child / children under the following instructions.

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\_\_\_\_\_  
Child's Name

X \_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

X \_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

# The School of Literacy II

7415 East End Ave.  
Chicago, IL 60649

## THE SCHOOL OF LITERACY II, LLC TUITION AGREEMENT

I, (name of parents) \_\_\_\_\_, parents of

(Name of child/children) \_\_\_\_\_, agree to pay The School

of Literacy II, LLC the following annual fees for the school year beginning January 1<sup>st</sup>, 2017 through  
December 31<sup>st</sup>, 2017.

\_\_\_\_ Tuition - \$6,000 per student

\_\_\_\_ Registration Fee - \$100 per family

\_\_\_\_ Fundraising Obligation - \$150 per family

Fees for start dates after January 1<sup>st</sup>, 2017 are pro-rated on a monthly basis.

Based on the start date (list date \_\_\_\_\_), I am responsible for the following pro-rated  
fees.

\_\_\_\_ Your pro-rated tuition fee due for the 2017 school year is: \_\_\_\_\_

\_\_\_\_ Your pro-rated registration fee due for the 2017 school year is: \_\_\_\_\_

I elect the following TUITION payment schedule (please check one):

- \_\_\_\_ I. Annually                      \$6,000 due Jan 1<sup>st</sup>  
\_\_\_\_ II. Semi Annually              \$3,000 due Jan 1<sup>st</sup>, Jul 1<sup>st</sup>  
\_\_\_\_ III. Quarterly                      \$1,500 due Jan 1<sup>st</sup>, Apr 1<sup>st</sup>, Jul 1<sup>st</sup>, Oct 1<sup>st</sup>  
\_\_\_\_ IV. Monthly                      \$500 due 1<sup>st</sup> of each month

I elect the following REGISTRATION FEE payment schedule (please check one):

- \_\_\_\_ \$120 to be paid at time of registration  
\_\_\_\_ Two \$60 payments to be paid over a two-month period  
(must be paid in full no later than Feb 28<sup>th</sup>)  
\_\_\_\_ Three \$40 payments to be paid over a three-month period  
(must be paid in full no later than Mar 31<sup>st</sup>)

I elect the following FUNDRAISING payment schedule (please check one):

- \_\_\_\_ \$150 payment at time of registration  
\_\_\_\_ \$150 payment (must be paid in full no later than Apr 30<sup>th</sup>)

I have been advised and agree to the following:

- \_\_\_\_ If I elect for my child not to attend school for any reason during the contractual agreement, I am  
responsible for payment on the regularly scheduled date.

\_\_\_\_\_ Tuition is expected to be paid in full on the first day of the agreed month. If the first day is a Saturday or Sunday, tuition is due the first Monday.

\_\_\_\_\_ A \$10 per day late fee will be assessed to my account if tuition payment is made after the 5<sup>th</sup> day of the month. Daily charges will be assessed until full payment is received. If my tuition balance (including any late fees) is not paid in full by December 31, 2017, my child is not eligible to re-enroll/register for the 2017 school year.

\_\_\_\_\_ The annual fundraising obligation is \$150 per family. Each family will receive ten (10) tickets valued at \$15 each for entry to The School of Literacy II's Annual Student Academic Expo.

Date:

\_\_\_\_\_

The School of Literacy II Staff: \_\_\_\_\_  
(Signature)

Parent: \_\_\_\_\_  
(Signature)

All terms are binding unless otherwise expressed and agreed to in writing.

## **ENGAGEMENT ENROLLMENT AGREEMENT**

The School of Literacy II, LLC  
9535 S. Jeffrey Blvd.  
Chicago, IL 60617



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**Parent (Client) Name(s)**

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**{Student Name}**

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**{Insert address of Client}**

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**{Date}**

**ENGAGEMENT AGREEMENT**

**Exhibit A:**

As promised, we have set out below a description of the services that The School of Literacy II, LLC will provide to you along with a fee assessment with the terms and conditions of this agreement. The School of Literacy II, LLC will provide the following services: The School of Literacy II, LLC is a learning institution in which cultivates and adheres to the mental development and stimuli of children. By understanding through research there is direct need for the mental, emotional, and social development of children in relation to their prospective age, pace, and learning style. We believe educational development is not simply limited to the learning institution, but in direct correlation, the child's home/parent(s) and or guardian(s), which encompassing the principle that learning is a lifelong process by which The School of Literacy II, LLC provides the essential tools which parents translate, to their desired outcome through individual learning and conditioning techniques. The School of Literacy II, LLC, a limited liability corporation, agrees to provide: 1) educational consultation and 2) educational services prescribed as: reading & comprehension, advanced mathematics, vocabulary lessons, French, anatomy, social science, history, culture & class, geography, astronomy, yoga & meditation (additional fee), chess club (additional fee), Jujitsu (additional fee) and vegan meal plan (additional fee).

**Term:** This Agreement shall become effective when consideration & acceptance is approved by signature of both \_\_\_\_\_ and The School of Literacy II, LLC, and shall continue in full force and effect until performance and payment shall be completed by a minimum of six months to both the Client and provider, respectively, or until either party terminates this Agreement in accordance with the provisions set forth below.

\_\_\_\_\_ Initials

**Enrollment Agreement:** This is a contract between the Parent(s) and our institution, The School of Literacy II, LLC, requires that parents enroll children for at least six consecutive calendar months at our institution without gaps in the timeline specified, which includes but not limited to, full tuition, one hundred days of student attendance, parent participation in a minimum of three parent/teacher student progress conferences, parent participation in a minimum of three school activities, and adherence to all Code of Conduct and School guidelines as referenced in the enrollment packet. Since The School of Literacy II's, academic school year consists of fifty-two weeks, any termination of enrollment after the initial

six months by parent must be conducted by notifying The School of Literacy II, LLC 60 days in advance with the appropriate documentation, being proof of the given event. If termination occurs prior to six months, The School of Literacy II, LLC holds the right to seek full reimbursement of all tuition fees and penalties.

**Postponement/Termination:** The purveyor may suspend and or terminate this agreement at any time that they, The School of Literacy II, LLC, and or its representatives so deem fit. In contrast the client may only postpone said agreement if the child falls ill and or relocation occurs. In such an event proof, must be provided within a reasonable amount of time to the purveyor. By which the client is still responsible for any balance and all equitable fees.

**Termination for Cause:** Will only be considered after the initial six-month commitment is fulfilled and with 60 days prior written notice. All arguable documentation is required to either be hand delivered to the program director or by certified mail to the facilities address. All clients then reserve the right there after to dissolve the contract only after the notice is given & consideration is accepted by the purveyor. All past and present payments must be received and paid for in full. If reasonable discretion is not provided as described and the client so chooses to terminate the mutual agreement all monetary liability then transfers to the parent and or guardians such as: all indemnities arising from and against all liabilities, losses, costs, damages (including consequential damages), fines, suits, administrative proceedings, judgments, and expenses (including attorneys' and consultants' fees) (collectively referred to as "costs") which may be asserted, claimed or recovered against or imposed upon any collection site legal fees incurred during the recovery efforts. The late fee(s) on past due balances will continue to incur until balance is paid in full or settled at a rate of five percent weekly.

**Termination Without Cause:** Neither party may terminate this Agreement without legal or stated just cause noted within this contract.

\_\_\_\_\_ Initials

**Liability:** The School of Literacy II, LLC is not responsible for the acts of any subcontracted third party entities, adjuncts, or staffs' neglect and or action(s) that may arise during the life of this contract and considered as a direct liability to the institution. Or any acts that may either portray the institution and all its members in an ill manner. A gag order is automatically agreed to by the client in such a case until said time of resolution through this, agreed upon, pre-approved arbitration or thereafter, legal judgment. Any and all defamation conducted by the client pertaining to the learning institution and or its members including students either written or express verbally by the client after the acceptance of this contract is agreed to otherwise be an infraction of this contract and shall be a direct violation to which holds any and all parties involved to monetary recovery through legal action from the purveyor, specifically, The School of Literacy II, LLC. The School of Literacy II, LLC is not responsible for any personal loss of items due to negligence of the client(s), though a minor, guardian(s) have provisionary legal rights to the contents within the personal possessions of the individual child and should be aware of all physical contents within the student possession, and any and all loss is subsequently the sole responsibility of the parent and or the guardian.

**Compensation:** The School of Literacy II, LLC is expected to be paid in full at the first Monday of every month unless agreed to in writing, otherwise at a rate of \$450, four hundred and fifty dollars and zero cents is due upon completion of monthly services. This does not include any

services that require additional fees. Also, there is a \$10.00 per day, early drop off, considered before 7:30 AM. In addition, there is a \$1, one dollar per minute surcharge for children left after 6:00 PM, all terms are binding unless otherwise expressed and agreed to in writing.

**Payment:** Invoices may be issued after the actual performance of Services and are payable one (1) day after receipt, payments are always consider late if not paid on by the first Monday of every month. All outstanding balances remaining unpaid thirty (30) days after the due date shall be subject to interest at the rate of five percent (5%) per week starting from the due date and continuing until it is paid in full.

**Acceptance:** All parties involved are agreeing to enter this contract and are of both sound body and mind & comprehend to the best of their knowledge all the terms and conditions thereby expressed in this agreement.

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**Parent Signature**

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**Parent Signature**

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**Student Name**

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**The School of Literacy II, LLC**

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**Date**

## **The School of Literacy II**

7415 S. East End Ave.  
Chicago, IL 60649

### **Registration/Enrollment Checklist**

Schedule appointment for a tour - Tour Date: \_\_\_\_\_

Complete the tour

Complete/Sign forms within the Registration Packet

- Registration/Application Form
- Tuition Agreement
- Medical Form
- Immunization Exemption Form
- Enrollment Engagement Form
- Corrective Action/Discipline Form

Arrive at SOL II on your start date with completed registration packet,  
registration application fee of \$50 and your first tuition payment

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### Corrective Action/Discipline Form

I agree and understand that if my child, \_\_\_\_\_ has been deemed disruptive or violating The School of Literacy II's code of conduct, the institution has the right to enforce any of the below corrective action(s), in addition to the notification of the parent(s) of the incident with enforced corrective action. I also understand that if I waive to any of the below discipline tactics, I must document in writing a waiver, return the waiver to The School of Literacy II's administration and assume responsibility of removing my child from the premises immediately in the time of incident. This document is honored for the legal custodial parent/guardian. I understand that The School of Literacy II uses discretion and sound judgement and within reason before administering any of the below discipline tactics. None of the below discipline measures are enforced in excess. The School of Literacy II, as a private institution, reserves the right to terminate enrollment at any point as documented in the Code of Conduct.

#### Corrective Action:

Push-ups (no longer than 5 minutes)  
Push-up stance (no longer than 5 minutes)  
Squat position  
Jumping jacks  
Sit ups  
Isolated corner  
Scolding  
Ruler tap on the hand

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Parent

\_\_\_\_\_  
Date