



**CATHOLIC INDEPENDENT SCHOOLS
NELSON DIOCESE
International Student Program
2.9 Student/Parent Acceptance Agreement**

The Catholic Independent Schools of the Nelson Diocese wish to provide a challenging program for students studying in our schools. Our hope is that students will grow in their faith and discover what it means to live in a global community. There are, however, certain expectations of our students who are enrolled in our program. These expectations include important obligations on the part of each student accepted to study at our schools. Each student and the parent(s) or guardian of each student accepted into our program must read the following agreement and must, by signing it, agree to be bound by and honour its terms.

1. Law, Rules and Regulations

I agree that I will abide by all laws of Canada, and the School's Code of Conduct and Homestay guidelines and policies, as outlined by the School/Diocese. I understand that the unlawful use of drugs will not be tolerated and that alcohol use is also forbidden in all circumstances. I understand that violation of the above will result in my dismissal from the school. I understand that in case of dismissal, there will be no refund on tuition paid.

2. Homestay

I appreciate that living in a homestay environment provides me with an opportunity to develop friendships with individuals of a different culture. I acknowledge that it is mandatory for me to live with the homestay family that has been approved and selected by the school. I will make every effort to make my homestay experience a successful one. While living with a homestay family, I will obey family rules and show respect for other family members. If problems do arise, I will attempt to resolve them with the parties involved. I understand that the International Students Program Coordinator will be available to me if I require assistance.

3. Parents Residing with their Children

I understand, as the parent of my child/ren enrolled in the International Student Program, that according to Provincial/Federal laws all children under the age of 18 must live with a responsible adult. I understand that if I wish to visit my home country, I will inform the International Students Program Coordinator of my plans before departure and will arrange for a responsible adult to live with my child/ren while I am away.

4. Attendance

I understand and accept the obligation to attend all classes in the educational program provided to me. I agree that all absences must be explained by a note from my parent/homestay parent and that unexplained absences may lead to my dismissal from the program.

5. Out of Town Travel

I agree to complete the travel document available through the school. I am permitted to visit relatives, close family friends and student friends only if there will be adult supervision. Permission from the school administration must be granted. Homestay families must be informed well in advance of any plans to travel.

6. Refund Policy

In the event that I am unable to obtain a Student Study Permit or decide not to attend or to leave the International Student Program, I agree that only a portion of the paid tuition fee will be refunded. In all cases, the application fee will be retained to cover administrative expenses. The following refund policy will apply for each school year for which a student is registered:

- Full refund, less Application Fee, if the International Student Authorization is not approved by Canadian Immigration (student must include letter of rejection from High Commission).
- If the student withdraws prior to date of admittance, 2/3 of the tuition is refundable.
- If the student withdraws within one month of admittance, 1/2 of the tuition is refundable.
- No refund of the tuition fees if the student withdraws after the first calendar month of the program.
- No refund of the tuition fees if the student is found to be in violation of school rules (i.e., chronic absenteeism, drinking alcohol, taking drugs,).

7. Medical Authority and Release

We, as parents/guardian of the undersigned student, do hereby authorize the school staff and the sponsoring homestay parents to consent to any X-ray examinations, anesthetics, medical or surgical diagnosis or treatment or hospital care which is deemed advisable, and is rendered under the general supervision of any licensed physician or surgeon, whether such treatment or diagnosis is rendered at the office of said physician or surgeon or at the hospital.

8. General Release

We, the undersigned, do waive and release all claims against the School for the injury, loss, damage, accident, delay or expense resulting from the applicant's participation in the International Student Program. We also release the School and agree to indemnify them, with regard to any financial obligations or liabilities that the applicant may personally incur, or any damage or injury to the person or property of others that the applicant may cause while participating in the International Student Program.

We understand that the School is not responsible for any loss or injury suffered by the applicant during periods of travel. If the applicant becomes ill or incapacitated, the School may take such actions as it considers necessary, including securing medical treatment and transporting the student home at his or her own expense. We release the School from all liability related to such actions.

We understand that the applicant's participation may be terminated at the discretion of the Principal without any refund of fees, and that the applicant may be sent home at his or her own expense if he or she does not adhere to the School's guidelines and rules as set out by the School Code of Conduct, Student Handbook and the Acceptance Agreement.

I have read the above and agree to fulfill all my obligations as set out. I also agree to both the medical release authorization and to the agreement and release clause.

Name of Student _____ Student Signature _____ Date _____

I/we the parents/guardians of the student signing above have read all the above including both the medical release authorization and the agreement release and I/we agree that we will use our best efforts to ensure that our child honours all obligations set out and we agree to be bound by the release authorizations.

Name of Parent/Guardian Parent/Guardian Signature Date

Name of Parent/Guardian Parent/Guardian Signature Date

Witness Date