

### APPLICATION FOR ADMISSION

Please complete in PRINT handwrit	ing			
Expected date of entry				
Applicant Data				photo
Name(Last) (First)	(Middle)			
Swiss Social Security Number: 756 /	_//	<b>*</b>		
Nationality	Gender: M	] F [		
Date of birth dd / mm / yyyy	First language	<b>.</b>		
Present Grade	Additional languages			
Grade applying for	☐ German _	years	☐ French	ı years
Most recent school attended Full name and address, phone number and en	Other:		f attendar	
		From		То
		mm / yy	ууу	mm / yyyy
Phone: Email				

To complete this application it is necessary to provide the school with the 2 most recent school reports.

\*This number can be found on your health insurance certificate

Please read and complete all forms and return them signed



# Parental Information Please complete in PRINT handwriting

Fathers name(Last)	Natio	nality
Fathers first language	Fluent English	] yes □ no
Mothers name(Last)		
Mother first language	Fluent English	] yes □ no
Address to send school correspondence (in Switzerland, if already available)		
Contacts Home office	mobile	
Mother		
Email:		
Father		
Email:		
Parentsqbusiness affiliation (name and add	dress)	
Insurance: Parents are expected to obtain for their children. The school does not prov		
If enrollment is accepted I agree to pay all I	fees when due as outli	ined in the financial regulations.
Signature Father:	Signature Moth	er:
Date	Date	
For ac	dministrative use only:	
HOS approval: Grade placement: Directors approval:	Date: Date of entry: Date:	EAL: Y N German Level: French Level:



### **Additional Student Information**

The School reserves the right to refuse admission or cease enrolment if educationally significant information is withheld from the school during the admission process and/or the student's best interests and needs cannot be met effectively by the school's programmes and services.

Studer	nt name				
		(Last)	(First)	(Middle)	
	ary, for I				e permission, should it prove physician or the hospital au-
I agree	: <u> </u>	I do not agree			
Please	print the	e name and phone	number of the inc	dividual to contact if the	parents cannot be reached
Details	s of any o	chronic illness			
Descri	be any p	problems with the	e studentBs sight	and/or hearing	
-					
Has yo		Yes ☐ No		d in any type of Specia	-
Does y	our chile	d have any physi	cal or learning o	r behavioral disabilitie	s? □Yes □ No
If yes,	please id	entify			
Any fu	rther info	ormation you fee	I the school sho	uld be aware of	
Signatı	ure Fathe	er:	Si	gnature Mother:	
Date			Da		



## **CHOICE OF LAW AND JURISDICTION CLAUSE**

You have decided to send your child to International School. Please sign the following agreement.

Rechtswahl- und Gerichtsstandsklausel
Der Ausbildungsauftrag untersteht schweizerischem materiellem Recht.
<ol> <li>Allfällige bestehende oder künftige Rechtsstreitigkeiten aus dem Ausbildungsauftrag zwischen den Vertretern der elterlichen Gewalt von</li> </ol>
(Name des Kindes)
und International School . Zurich North, sowie den damit zusammenhängenden Verträgen sind ausschliesslich vor den Gerichten am schweizerischen Geschäftssitz der Firma auszutragen.
Choice of Law and Jurisdiction Clause
<ol> <li>The relationship between the school and its representatives, versus the representatives of the child is subject to substantive Swiss law.</li> </ol>
2. The Swiss courts at the companys domicile shall have exclusive jurisdiction over existing and subsequent disputes resulting from the relationship between the representatives of
(Name of the child)
and International School . Zurich North, as well as from the respective interrelated contracts.
City, Date:
Signature Father:

Signature Mother:

#### FINANCIAL REGULATIONS

### Schedule of Fees School year 2018 / 2019

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Capital Fund Fee	CHF	3 <b>ø</b> 00	
·	CHF	1ф00	each additional child

#### **Annual Tuition**

Nursery	CHF	14 <b>¢</b> 400	5 half days
Nursery	CHF	240000	5 full days
Pre-K up to Grade 5	CHF	26 <b>0</b> 00	
Grades 6 to 12	CHF	290000	

### Other Fees, if applicable

EAL (English as Additional Language)	CHF	1ф500	per semester
Cambridge + Edexcel Exam Fees	CHF	300	per subject
After school care	CHF	10	per hour
Special needs support (individual)			external support
Lunch			external Caterer

#### **Late Enrollment**

Enrollment until end October	100%	of the annual tuition fee
Enrollment in November and December	80%	of the annual tuition fee
Enrollment in January and February	65%	of the annual tuition fee
Enrollment in March and April	50%	of the annual tuition fee
Enrollment in May and June	30%	of the annual tuition fee

#### **Early Withdrawal**

Withdrawal by end October	30%	of the annual tuition fee
Withdrawal by end December	50%	of the annual tuition fee
Withdrawal by end February	65%	of the annual tuition fee
Withdrawal by end April	80%	of the annual tuition fee
Withdrawal in May or June	100%	of the annual tuition fee

#### **Good to Know**

Funding Fee: is charged one time and non refundable

**Termination** during the current school year needs to be in writing and to be received at least 2 weeks in advance to the termination month listed in the early withdrawal schedule.

**Leaving:** If you are planning to leave the school at the end of the school year, the cut-off date to withdraw your child is May 31st. Any withdrawal notification given after this date will incur a fee of CHF 1500 per child.

**No-show:** after receiving a confirmation that the application form has been accepted, a fee of CHF 1000 is incurred, even if the student does not subsequently attend the school.

### **CONDITIONS AND TERMS**

#### **Tuition**

Tuition fees include all charges except:

- "charges resulting from overnight excursions and ski trips
- " student bus service
- " lunch
- " special academic tutoring / extended learning support
- "individual music lesson
- " activities club, homework- and after school care

### **Payment of Fees**

The first half of the tuition fee is due within the targeted payment date. The second half is due at the dated given on the invoice. A late payment charge of one percent/month is added to all fees and charges past due. A student may be barred from attending school if the school account remains unpaid following two written reminders. School records cannot be issued until all outstanding balances have been settled.

Preferred Billing (please tick):			
☐Yearly			
☐ Half Yearly . per semester			
☐ Quarterly			
☐ Monthly (with a surcharge of CHF	<sup>-</sup> 200 p.a.)		
Additional Services The school has the right to declare EAL included in the Tuition or in the Corpor beforehand about the arising costs.			
Insurance Parents are expected to obtain health, does not provide accident or liability insu		ce for their	children. The school
I / We agree to and will comply with the creamily Name (Please print):	onditions and terms described	above.	
Signature Father:	Signature Mother:		
Place and Date (day / month / year):			
The Company will pay the fees	(Company Name)	_ 🗌 Yes	□No
If yes, Company Stamp and Signature:			