



School Contract

Student Information

Last name: _____ First name _____
Current Grade _____ DOB: _____
Home address: _____

Home Phone number: _____ Cell : _____
Languages spoken: English French Other: specify which _____
Name of current school and current _____
Name of Principal: _____ School tel.: (____) _____
School Address _____

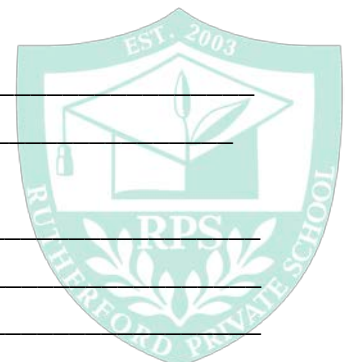
Family Information

Parent / Guardian 1 (with whom the child resides)
Last name _____ First name: _____
Relation to child _____ Occupation: _____
Work phone: (____) _____ Mobile phone: (____) _____
E-mail address or home phone number _____

Parent / Guardian 2

Last name _____ First name: _____
Relation to _____ Occupation: _____
Work phone: (____) _____ Mobile phone: (____) _____
E-mail address or home phone number _____

Address, if different from student's _____
City/town: _____ Country: _____ Postal Code: _____
Home phone, if different from student's (____) _____





Emergency Contact Information

Please provide the names and contact information of persons that may be contacted in case of an emergency.

Name: _____ Relation to child: _____

Phone number(s): _____

Other contact information: _____

Name: _____ Relation to child: _____

Phone number(s): _____

Other contact information: _____

Health Information

Student health insurance policy number: _____

Doctor's phone: (____) _____ Doctor's address: _____

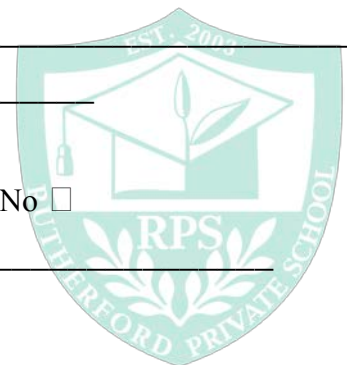
Please list any allergies your child may have: _____

Health Information Continued

Please indicate any social, emotional or medical conditions of student:

Is student being administered medication on a regular basis? Yes No

If yes, please provide details: _____





Rutherford PRIVATE SCHOOL

A Division of Eligor Education

37 Jacob Keffer Pkwy., Vaughan, L4K 5N8, Ontario, Canada
Phone 1: 905-532-0229, Phone 2: 905-832-9454,
Fax: +1 289-588-1522
info@rutherfordschool.ca, www.rutherfordschool.ca

Does your child have any physical limitations that would prevent participation in sports and other related physical activities? Yes No

If yes, please provide details: _____

Please provide any other health information that may be helpful to us:

Student Name

Parent Signature





CONSENT OF PARENT(S)/GUARDIAN(S)

I/We understand and agree that, in the event of a medical emergency, a medical practitioner and/or teacher, Principal or other Eligor employee can authorize emergency medical care for the above-named student.

I/We authorize the School to provide the above-named student with routine first-aid, including parental/guardian authorized medication and, in the event of an emergency, to provide, administer, obtain and/or authorize the necessary medical treatment until such time as I/we can be reached to authorize such further care. It is understood that in the event of a serious medical problem or emergency, every effort will be made to contact the parent(s)/guardian(s). It is understood that this consent shall remain in effect for the current school year.

I/We also agree to indemnify the School, its Director, Officers, Agents and Employees from any and all claims for damages arising from any illness, injury, or otherwise related actions to my child as a result of any accident, illness, injury or for any other reason arising from participation in any school activities.

I/We, hereby acknowledge that the School is not free of allergens. I/We understand that my child may inadvertently come into contact with a substance he/she may be allergic to and that such contact may cause an allergic reaction. I understand that there are certain risks of allergen contact that are inherent in a school setting.

Permission to go on outings and be transported by shuttle service

I/We have adequate medical coverage and insurance; therefore, I/we give permission for the above-named student to be picked up from school by the student shuttle service and to participate in and travel in vehicles to and from all out-of-school events during the school year.

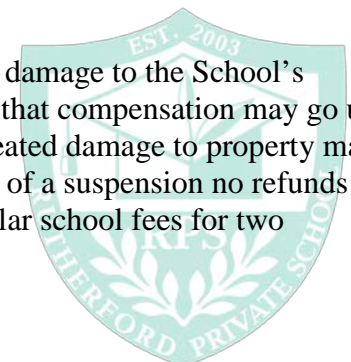
Photographic Waiver

I/We authorize the above-named student's photographic or video graphic image to be used for school and advertising purposes.

Damage to property

I/We understand and agree to provide compensation to the School for any damage to the School's property that was inflicted by the above-named student. I/We understand that compensation may go up to and include the full cost of the item damaged. It is understood that repeated damage to property may result in a student's suspension or expulsion from the School. In the event of a suspension no refunds will apply, while in the case of an expulsion I/we will be charged the regular school fees for two subsequent weeks and no refunds of fees paid up to this point will apply.

Injury to others





Rutherford PRIVATE SCHOOL

A Division of Eligor Education

37 Jacob Keffer Pkwy., Vaughan, L4K 5N8, Ontario, Canada
Phone 1: 905-532-0229, Phone 2: 905-832-9454,
Fax: +1 289-588-1522
info@rutherfordschool.ca, www.rutherfordschool.ca

I/We understand and agree that if the above-named student inflicts injury on another student or staff member, he/she will face suspension or expulsion from the School. In the event of a suspension no refunds will apply, while in the case of an expulsion I/we will be charged the regular school fees for two subsequent weeks, and no refunds of fees paid up to this point will apply.

Verbal abuse

We understand and agree that if the above-named student displays severe disrespect in the form of verbal abuse, including coarse language or injurious and discriminatory comments, he/she will face suspension or expulsion. I/We understand that in the event of a suspension no refunds apply, while in the case of an expulsion I/we will be charged the regular school fees for two subsequent weeks, and no refunds of fees paid up to this point will apply.

Parent Signature

Date:

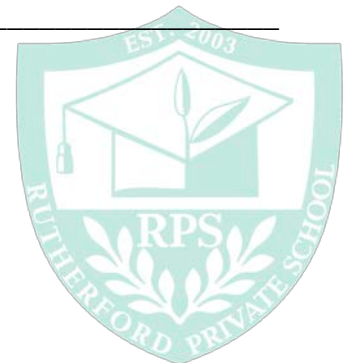
Student Signature

Date

Name of the Program or List of the courses and Schedule:

1. _____
2. _____
3. _____
4. _____
5. _____

Parent Signature: _____ **Date:** _____





Rutherford PRIVATE SCHOOL

A Division of Eligor Education

37 Jacob Keffer Pkwy., Vaughan, L4K 5N8, Ontario, Canada
Phone 1: 905-532-0229, Phone 2: 905-832-9454,
Fax: +1 289-588-1522
info@rutherfordschool.ca, www.rutherfordschool.ca

PAYMENT AND REFUND

Tuition fee are \$13.800 for international students K-12.

Tuition fee must to be paid in full to be register with Rutherford Private School and receive latter of acceptance.

In case of student permit and visa to Canada will be rejected The Rutherford School will keep right to review visa require documents and resubmit them one more time after international student will compile all requirements.

If visa for international student will be rejected second time The Rutherford School will refund student in full amount except of \$500 administration fee and additional expense such as bank money transfer expense, postal expense, and other legal expense. All expense documents will be provided.

The Rutherford School will refund half price of tuition fee if student will decide withdrawals from program indicated in acceptance letter by any reason before first day of study after getting Canadian Student Visa.

NOTE: THERE ARE NO REFUNDS FOR WITHDRAWALS AFTER FIRST DAY OF SCHOOL, HOLIDAYS, SICK DAYS, OR DAYS MISSED FOR ANY REASON, THROUGHOUT THE SCHOOL YEAR.

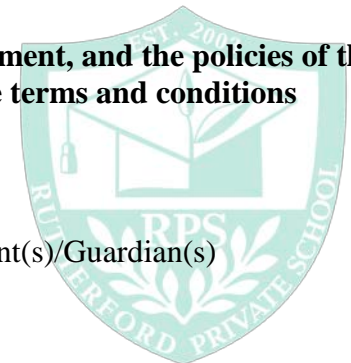
5% DISCOUNTS ARE OFFERED FOR EACH 2ND AND 3RD CHILD OF THE SAME FAMILY. 2ND & 3RD CHILDREN MUST BE OF THE SAME PARENTS AND BE REGISTERED FOR THE FIVE FULL DAY PROGRAM. MULTIPLE DISCOUNTS ARE NOT OFFERED UNDER ANY CIRCUMSTANCES..

Indicate Amount of payment FULL TUITION FEE FOR THE FIRST YEAR

I have read and understood the terms of contract, the methods of payment, and the policies of the school as outlined in the ELIGOR Corp. and I hereby agree to all the terms and conditions stated therein.

Name of Student

Name of Parent(s)/Guardian(s)





Date _____

**POLICY REGARDING THE USE OF SCHOOL
COMPUTERS AND THE INTERNET AND PRIVATE ELECTRONIC GADGETS**

Rutherford Private School has strived to offer its students access to technological systems and equipment. The following is a policy to increase awareness and effective use of these systems and equipment within the school. This type of document is becoming standard in most schools with computers and the Internet. By signing this form, users are agreeing to follow the responsible, legal and ethical guidelines of proper usage of the equipment and resources offered by the school.

UNACCEPTABLE USE

- Unacceptable use includes, but is not limited, by the following:
- vandalizing computer hardware, software, or data of other users
- gaining unauthorized access to computer systems
- using accounts of other users
- downloading information onto school computers without approval from the teacher
- Subscribing to e-mail lists using division accounts.
- accessing controversial material which is inappropriate or offensive
- transmitting copyrighted, obscene or illegal material.
- threatening anyone or committing illegal acts.
- using school computers and the Internet for commercial purposes.
- Using school WiFi for none educational purpose
- Using cell phone during class time strongly prohibited
- Using electronic gadgets during class time except of calculators or other devices allowed by teacher are strongly prohibited

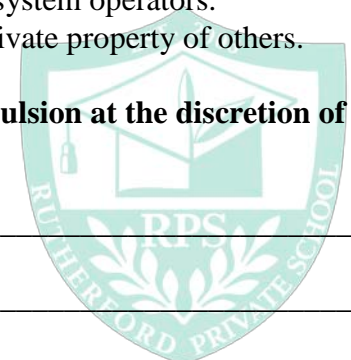
"NETIQUETTE" :You are expected to abide by the generally accepted rules of network etiquette (called "netiquette"), which include, but are not limited to, the following:

- I will be polite, and I will not swear or use inappropriate language.
- I will not reveal personal information, such as addresses phone numbers, or passwords of anyone.
- I understand that electronic mail is not private and can be read by system operators.
- I understand that all information available on the network is the private property of others.

Disregarding these rules can result in a penalty, suspension or expulsion at the discretion of the school principal without any financial compensation

Parent/Guardian: _____

Student: _____





School Behavior Policy/Contract

Students are to demonstrate respect for themselves, for others and for the responsibilities of citizenship through acceptable behavior. Respect and responsibility are demonstrated when a student:

- Comes to school prepared, on time and ready to learn;
- Shows respect for themselves, for others and for those in authority;
- Refrains from bringing anything to school that may compromise the safety of others;
- Follows the established rules and takes responsibility for his/her own action.
- Electronic Equipment is strictly prohibited on the premises (ie. Cellphones, ipods, PSPs, etc...)
- There is absolutely **NO** food or drinks allowed in the classrooms
- Student late to the class less than 10 minutes may attend to class and will be count Late
- Student late to class more than minutes not allow attend to class and will be count Absent

Financial Penalty will be instated in the following cases: acts of vandalism causing extensive damage to school property or property located on school premises. This includes bathrooms and the building's exterior.

Disregarding these rules can result in a penalty, suspension or expulsion at the discretion of the school principal without any financial compensation

ATTENDANCE POLICY AND PROCEDURES

At Rutherford Private Private School, class attendance is compulsory, except in the case of illness. Credits can be lost in the case of frequent absence for other than medical reasons, or are jeopardizing his/her successful completion of a course. Punctuality for all classes is expected, as it is a mark of respect for oneself and one's fellows.

At mid-semester:

- Where a student has missed five (3) classes, a teacher may be unable to assess his/her progress and so may give a "No Mark" designation on the progress report (after consultation with the Principal).

At semester end:

- Where a student has missed ten (5) classes, a teacher may be unable to assess his/her progress and so may give a "No Mark" designation after consultation with the Principal. It may be necessary for the student to attend additional classes in order to meet the expectations for that course.

Student Name and student signature
Parent/Guardian Signature

_____ **Date**

_____ **Principal Signature**

