# **Leonardo Da Vinci Academy of Arts & Sciences**

100 Allanhurst Drive, Toronto, Ontario, Canada M9A 4K4 (416) 247-6137

www.ldva.on.ca

### ELEMENTARY APPLICATION FORM 2019-2020 - Page 1 of 3

PLEASE PRINT

| PART A - STUDENT INFO      | RMATION  |             |                |              |        |
|----------------------------|----------|-------------|----------------|--------------|--------|
| STUDENT:                   |          |             |                |              |        |
| Surname                    |          | Given Name  |                | Middle Name  |        |
| ADDRESS:  Street Number an |          |             |                |              | Apt. # |
|                            |          |             |                |              |        |
| City                       | Province | Postal Code | E-Mail         |              |        |
| TELEPHONE NO.              |          |             | DATE OF BIRTH: |              |        |
| YEAR TO BE ENROLLED:       | PRESENT  | Age: Curre  | NT GRADE:      | GENDER: MALE | FEMALE |
| PART B – FAMILY INFORM     | MATION   |             |                |              |        |
| Father/Guardian:           |          |             |                |              |        |
|                            | Surname  | Given Nam   | е              | Middle Name  |        |
| Address:                   |          |             |                |              |        |
| Street Number an           | d Name   |             |                |              | Apt. # |
| City                       | Province | Postal Code | E-Mail         |              |        |
| TELEPHONE NO. (HOME)       |          | (Bus)       |                | (CELL)       |        |
| Mother/Guardian:           |          |             |                |              |        |
|                            | Surname  | Given Nam   | е              | Middle Name  |        |
| Address:                   |          |             |                |              |        |
| Street Number an           | d Name   |             |                |              | Apt. # |
| City                       | Province | Postal Code | E-Mail         |              |        |
| TELEPHONE NO (HOME)        |          | (Rus)       | 1              | (CELL)       |        |

#### LDVA ELEMENTARY APPLICATION FORM 2019-2020 - page 2

| PART C – CURRENT SCHOOL INFORMATION  |   |                           |                                 |             |  |  |
|--|---|---------------------------|---------------------------------|-------------|--|--|
| Name of Scho   | ool:                                      |                           |                                 | _           |  |  |
| Address:   |   |                           |                                 |             |  |  |
| St   | Street Number and Name                    |                           | Province                        | Postal Code |  |  |
| Telephone No   | .:  | -                         |                                 |             |  |  |
| PART D – TUITION AND PAYMENT SCHEDULE FOR 2019-2020  |   |                           |                                 |             |  |  |
| \$ 2,000   | To be paid upon acceptance                |                           |                                 |             |  |  |
| \$ 6,300   | To be paid by September 1, 2019 or upon e | enrollment                |                                 |             |  |  |
| \$6,300  | To be paid by February 1, 2020            |                           |                                 |             |  |  |
| \$ <u>14,600</u>   | TOTAL TUITION for academic year           |                           |                                 |             |  |  |
| OPTIONAL MONTHLY PAYMENT PLAN (includes a \$200 admin. fee): \$2000 DEPOSIT PLUS 10 POST-DATED CHEQUES DATEDSEPTEMBER 1, 2019 TO JUNE 1, 2020 OF \$1280 EACH.CHECK HERE FOR MONTHLY PLAN |   |                           |                                 |             |  |  |
| A \$200 non-refu   | undable application fee payable to Leonar | rdo Da Vinci Academy is ı | required with each application. |             |  |  |

#### PART E – CONDITIONS OF ACCEPTANCE

- 1. Children must be dropped off no earlier than 8:30 am and picked-up no later than 4:00 pm unless the child is enrolled in the extended hours programme. (A separate application for extended hours is available from the office)
- 2. An up to date "Immunization Record" must be provided upon acceptance or enrollment for each child.
- 3. The Academy reserves the right to withdraw a student if this is believed to be in the best interest of the student in question or if a student is deemed to inhibit the progress or safety of others.
- 4. A 2% per month interest charge will be applied to overdue fees.
- 5. Acceptance is conditional on meeting minimum enrollment requirements.
- 6. Tuition fee payments are **not refundable**. Parents/Guardians who choose to withdraw their student before year end will be held responsible for the entire tuition. Tuition payable is guaranteed by the parents/guardians signing the application.
- 7. Parents agree to allow the use of photographs, tapes, digital images or film in which they or their children are featured to be used for promotional or archival purposes by the school.

(continued on page 3)

## LDVA ELEMENTARY APPLICATION FORM 2019-2020 - page 3

| I/We have read the conditions of this application and agree to abide by the stated terms and conditions. I/We acknowledge that any incorrect information provided may invalidate any agreement. If acceptance is granted I/we agree to be responsible for the full tuition. |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| DATED:  |  |  |  |  |  |  |
| FATHER/GUARDIAN SIGNATURE   | MOTHER/GUARDIAN SIGNATURE  |  |  |  |  |  |
|   | LDVA CAPITAL AND BUILDING FUND  MY IS A NON-PROFIT ONTARIO CORPORATION AND A REGISTERED CHARITY  |  |  |  |  |  |
| Each new family is asked to make a m  | ninimum one time contribution to the LDVA BUILDING FUND. A donation of \$500 per ble tax receipt will be issued to the donor for the full amount of any donation made to |  |  |  |  |  |
|   |  |  |  |  |  |  |
| FOR OFFICE USE ONLY   |  |  |  |  |  |  |
| DATE OF ASSESSMENT:   | DATE OF ADMISSIONS DECISION LETTER:  |  |  |  |  |  |
| DATE STUDENT ENROLLED:  |  |  |  |  |  |  |
| DATE STUDENT GRADUATED:   | DATE WITHDRAWN:  |  |  |  |  |  |
|   | OFFICIAL, ADMISSIONS COMMITTEE   |  |  |  |  |  |