

# KONOS CONNECTION

## APPLICATION FORM

2010-11

Fill out one per student please; make additional copies as needed.

Student's Name \_\_\_\_\_

Birth Date \_\_\_\_\_ Grade Level in 2010-11 \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip code \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Father's occupation \_\_\_\_\_ Employer \_\_\_\_\_ Phone \_\_\_\_\_

Mother's occupation \_\_\_\_\_ Employer \_\_\_\_\_ Phone \_\_\_\_\_

Student E-mail \_\_\_\_\_ Cell \_\_\_\_\_

Home church: \_\_\_\_\_

Siblings and ages \_\_\_\_\_

### I am applying for entry in:

- KONOS ACADEMY** (Grades 9-12) Preferred class day: Tuesday \_\_\_\_ Wednesday \_\_\_\_
- KONOS JUNIORS** (Grades 7-8) Preferred class day: Tuesday \_\_\_\_ Wednesday \_\_\_\_
- KONOS KIDS** (Grades 4-6) Tuesday \_\_\_\_ Wednesday \_\_\_\_

### I am interested in taking one or more of the following accredited courses (grades 8-12):

- |  |  |
|--|--|
| <input type="checkbox"/> Spanish I (3:00 Wednesday only) | <input type="checkbox"/> Algebra I (Thursdays)   |
| <input type="checkbox"/> Spanish II (3:00 Tuesday only)  | <input type="checkbox"/> Geometry (Thursdays)  |
| <input type="checkbox"/> Spanish III (Monday)            | <input type="checkbox"/> Algebra II (Thursdays)  |
| <input type="checkbox"/> Physical science (Thursdays)    | <input type="checkbox"/> Advanced math/pre-calculus (Thursdays)                          |
| <input type="checkbox"/> Chemistry (Thursdays)           | <input type="checkbox"/> Business math (TBA)   |
| <input type="checkbox"/> Biology (Thursdays)             | <input type="checkbox"/> Calculus (TBA)  |
|  | <input type="checkbox"/> KONOS Communicators: Speech and Debate (grades 7-12 on Fridays) |

You will be contacted by individual teachers regarding times, costs, prerequisites, and materials.

### Enrollment and Fees

Returning student:

- I have enclosed the enrollment fee of \$25 before March 4; \$50 after March 4

New student:

- I have enclosed the enrollment fee of \_\_\_\_\_ \$50 before March 30; \$100 after March 30.
- I will pay the monthly tuition of \_\_\_\_\_ on the first class day of each month (September through May).

**KONOS ACADEMY** \$255 Additional students in the family \$195

**KONOS JUNIORS** \$190 Additional students in the family \$160

**KONOS KIDS** \$165 Additional students in the family \$140

- I will pay the materials fees by June 15. An invoice itemizing these costs will be sent to me.

**KONOS ACADEMY** \$250

**KONOS JUNIORS** \$225

**KONOS KIDS** \$200

- I give KONOS ACADEMY permission to provide emergency medical treatment.

- I give permission to \_\_\_\_\_ to provide transportation/carpool.

Parent's Signature: \_\_\_\_\_ Date \_\_\_\_\_

Insurance Provider: \_\_\_\_\_ Policy Number: \_\_\_\_\_

