



Enrollment Checklist:

- ☐ Enrollment Form
- ☐ Copy of MET, IEP, and/or 504
- ☐ Copy of ESA Funding Approval Letter
- ☐ School Withdrawal Form*
- ☐ Immunization Records
- ☐ Birth Certificate
- ☐ Proof of Residency

*Do not withdraw your student from present school until you have received your ESA approval letter!



Application for Admission 2019-2020 School Year

We welcome your application for your child. In order to complete the enrollment, it is important that all parts of this application are complete. PLEASE PRINT CLEARLY.

Date of Admission: m/_____ d/_____ y/_____

SCHOOL SCHEDULE

Monday through Friday from 9 am until 1:30 pm

CHILD'S INFORMATION

Child's First Name: _____ Child's Surname _____

Current Age: _____ year(s) _____ months

Date of Birth: (Month) _____ (Day) _____ (Year) _____

Home Address: _____ Postal Code _____

Home Telephone Number: _____

Language(s) Spoken at Home: _____

Please list the names and ages of siblings _____

FAMILY INFORMATION

Mother/Guardian Last Name: _____	Father/Guardian Last Name: _____
First Name: _____	First Name: _____
Employer: _____	Employer: _____
Address: _____	Address: _____
Work Phone: _____	Work Phone: _____
Cell Phone: _____	Cell Phone: _____
Email Address: _____	Email Address: _____
Child Lives with: Both Parents _____ Mother _____ Father _____ Other (please name) _____	
Correspondence: Both Parents _____ Mother _____ Father _____ Other (please name) _____	

PICK UP INFORMATION

My child can be picked up by:

Pick Up Person #1: _____

Home Phone _____ Cell Phone _____ Relationship to Child: _____

Or Pick Up Person #2 _____

Home Phone _____ Cell Phone _____ Relationship to Child: _____

Or Pick Up Person #3: _____

Home Phone _____ Cell Phone _____ Relationship to Child: _____

CURRENT MEDICAL INFORMATION

Child's Health Insurance Identification Card Number: _____

Name of Child's Physician: _____ Telephone Number: _____

Physician's Address: _____ Postal code _____

Immunization Record Attached: Yes ____ No ____ Reasons, if no – a written statement from a parent or legally qualified medical practitioner as to why the child should not be immunized.

My child has allergies: No ____ Not Known ____ Yes ____ if yes, please list allergens: _____

Please comment on:condition(s) that your child has that require(s) medical attention – such as diabetes, epilepsy, asthma, etc.

physical activity restrictions _____

hearing or vision problems that cannot be corrected _____

your child's previous history of communicable diseases: (e.g.: Chicken Pox, Measles)
_____other conditions that may require a teacher to take action for the benefit of your child's health _____
_____**PERMISSION FOR MEDICAL TREATMENT:**

In the event of an accident or illness involving my child while my child is in the care of Flex IT Academy, I hereby authorize the administration of any medical procedure deemed necessary, including anesthetic, by the above named Doctor, or any hospital Emergency Department, or by any other qualified physician. In no case will the staff or the center be financially liable for costs incurred as a result of emergency procedures undertaken.

Signature _____ Date: _____

EMERGENCY CONSENT

Contact Person #1 (in the event of an emergency) :(Name) _____

Address: _____

Home Phone _____ Cell Phone _____ Relationship to Child: _____

Contact Person #2 (in the event of an emergency) :(Name) _____

Home Phone _____ Cell Phone _____ Relationship to Child: _____

Contact Person #3 (in the event of an emergency) :(Name) _____

Home Phone _____ Cell Phone _____ Relationship to Child: _____

YOUR CHILD'S PROFILE (to help us get to know your child)

List any organized activities that your child has participated in – such as swimming lessons, library groups, etc.

What are your child's interests? _____

Does your child have fears or aversions? _____

Can your child verbally communicate his/her needs effectively? Yes ____ No ____

Has your child ever been hospitalized Yes ____ (for ?) _____
No ____

Other information you wish us to know: _____

SOCIAL MEDIA AND NEWS OPT OUT FORM

See attachment

REGISTRATION POLICIES

To register your child the school requires:

1. A completed Application for Admission
2. A copy of your child's birth certificate or passport as proof of age
3. A recent immunization form
4. Payment of fees as outlined below
5. Any progress reports or educational assessments that are available

PAYMENT POLICIES

Tuition fees cover all registration, tuition, capital and operating costs. Basic stationery supplies, work books, student folders are also covered by tuition fees.

Tuition Payment: For the school year (August to May)

1. Please call for tuition rates
2. Payment is collected quarterly.
3. First payment expected is in July, 2019 and the final payment will be collected on June 1, 2020.

****There will be \$1.00 charged for every minute that occurs 15 minutes after scheduled ending time**

Additional Costs – Field trips, school t-shirts and special events in the school.

As parent(s)/guardian(s), we would like to enroll our child at Flex IT Academy in the program indicated on this application.

As parent(s)/guardian(s), we consent to the collection, use and disclosure of personal information in respect of and on behalf of myself/ourselves and my/our child, which may be collected, used and disclosed as necessary for the purposes of providing education and other services, student records and administrative purposes related to Flex IT Academy and as otherwise required by law.

Name of Parent/Guardian (print)

Signature



480-744-0816
Denise@flexitacademy.com

Guidelines and Policy Manual

While in attendance at Flex It Academy, all students are expected to comply with our rules and school guidelines. In an effort to maintain a safe environment of both our staff and students, we ask that you please review the following rules with your student:

1. Be respectful to others.
2. Listen to your instructor
3. Keep hands, feet, inappropriate comments, and objects to yourself.
4. Move appropriately throughout the instructional space (including bathrooms).
5. Use respectful language at all times, remembering to use 'inside voices'.
6. Barring an emergency, please remember you are to stay on Flex It Academy campus at all times until you are picked up by an authorized adult.

"Discipline Policy"

Flex It Academy does not tolerate inappropriate behavior by students, most especially in the form of threats against other students and/or staff. This behavior does not promote a favorable learning environment and will not be accepted.

All Staff shall have the right to evaluate conduct and behavior regarding the students attending Flex It Academy.

As with any other disciplinary policy, there will be natural consequences for the following types of misconduct:

1. Failure to follow rules, policies and procedure of Flex It Academy.
2. A student's persistent refusal to follow the instructions of Flex It Academy Staff.
3. Use of obscene, vulgar, profane, disrespectful, demeaning or threatening words and/or actions or gesture directed to or in the presence of any student or school employee.
4. Mutual physical confrontations between students (fighting).
5. Possession and/or use of any tobacco or drug related items or 'look a like' items – this may include cigarettes, chewing tobacco and other tobacco-related products, vape cigarettes, lighters, alcoholic substances, drug-consumption devices, and any substance suspected of being a 'drug'.
6. A behavior that may result in physical or mental abuse to one's self.
7. Committing an act of indecent exposure in the presence of any other student, visitor or Flex It Academy Employee.



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“Disciplinary Actions”

1. Verbal redirection
2. Special assignments or removal from classroom
3. Program staff/student behavioral contract
4. Parent Contact
5. Suspension from School:
 - a. First Offense – 1 day suspension
 - b. Second Offense – 3 days suspension
 - c. Third Offense – Parent/Staff conference to determine continued enrollment in the program
6. Permanent withdrawal of School – includes non-academic activities taking place during and beyond the normal School hours (i.e. games, gym activities, computer lab, field trips, etc.)
7. Immediate notification of authorities if appropriate

*Please Note: The Flex It Academy Staff is responsible for utilizing a variety of intervention techniques before a student is referred to the school administration.

“Attendance Policy”

Parent(s) or guardian(s) are asked to refer to the academic calendar in order to identify what days classes are in session.

1. Students enrolled in Flex It Academy are expected to attend on all days specified on the academic calendar unless otherwise discussed with administrative staff.
2. Changes to the student(s) schedule must be submitted to the campus Office Manager one week prior to going into effect, so Flex It Academy Administration can be notified in a timely manner and proper planning can be accomplished on the student's behalf.
3. If your student will be absent, we asked that you contact the Office Manager at your home campus to inform them, phone numbers and contact information are available on the school website.

Inconsistent attendance or chronic absence may result in student being exited from the Flex It program.



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“Student Drop Off/ Pickup Policy”

*Our School day ends at 1:30, as such, parents are encouraged to pick up their students by 1:45 pm and NO LATER THAN 2:00 pm for the Yuma Campus. Parents are reminded to drive slowly, observe all safety regulations and be courteous to other patrons in the parking lot, walkways and school lobby.

*All parents or designated adult picking up MUST enter the school lobby to pick up their student. Campuses are closed to the public and parents will need to be granted entrance by school staff. Students will be awaiting pickup in the lobby.

*For the safety of your student, he/she will ONLY be released to the parents or designated pickup person. Should another adult be picking up your student, please email the campus Office Manager and/or call. Please be advised that any adult collecting a student will be required to provide photo identification. Once a student is released to his/her parent or designated pickup person, the student's care and safety are the responsibility of the parent or designated adult.

*In the event that a student must be picked up early, please notify the Office Manager via phone or email.

*If there are special court orders regarding parental custody – please provide documentation.

*During both arrival and dismissal any adult dropping off or looking to pickup a student will be required to sign them in/out in the front lobby.

****There will be \$1.00 charged for every minute that occurs 15 minutes after scheduled ending time**

“Visitation Policy”

Flex It Academy maintains an “open door” visitation policy, (We require that you make prior arrangements with Flex It Academy personnel so we can ensure the safety and privacy of our students). Parents, family members, and guests are encouraged to visit the program, during the hours of operation. Visitors are free to sit in on any classroom and view the academic progress and growth being developed. Whenever possible, visitors are also encouraged to participate in the learning activities of the classroom. We kindly request to be mindful of others, and respectful of their privacy.

****ALL VISITORS MUST HAVE AN ARIZONA FINGERPRINT CLEARANCE CARD**

<https://www.azdps.gov/services/public/fingerprint>

I have read and reviewed the contents of Flex It Academy's Guidelines and Policy Manual, and I agree to accurately carryout the policies and procedures of Flex It Academy.

Student's Name: _____

Mother's or Father's Signature: _____ Date: _____

Guardian Signature: _____ Date: _____



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CHILD PICK-UP AUTHORIZATION FORM

Child's name: _____

Main pick-up person:

Name: _____

Address: _____

Relationship: _____

Phone: _____

Additional persons who may pick up child/children on a less frequent basis:

Name: _____

Address: _____

Relationship: _____

Phone: _____

Name: _____

Address: _____

Relationship: _____

Phone: _____

Any person(s) NOT authorized to pick up my child/children:

Note: Any person unfamiliar to me will be required to show proof of identification. Under NO circumstances will the child be released to anyone other than those listed above without WRITTEN permission from the parent.

Mother's or Father's Signature: _____ Date: _____

Guardian Signature: _____ Date: _____



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Media Release Opt-Out Form

Check all that apply:

_____ **DO NOT** photograph, videotape, and/or interview my child for publication in public or at Flex IT Academy media. (This does not include the school yearbook.)

_____ **DO NOT** include my child's photograph(s) in the school yearbook.

Parent/Legal Custodian/Guardian Signature _____

Name (Please Print): _____ Date: _____

Student Name: _____

LAST

FIRST

MIDDLE

Student's School at Time of Signature: _____

Address of Student: _____

Representatives from the media or Flex IT Academy will photograph, videotape, and/or interview students in connection with school programs or events for printed/online publications, newsletters, news releases, website stories, videos, social media, and other school publications. Photos/videos/interviews taken by media are the news organizations' property and may be posted publicly and/or for resale. As of the 2019-2020 school year, we have implemented an "opt-out" media procedure. This means that unless your child's school has a signed Media Release Opt-Out Form on file, your child's photo/image/interview may be used in any of the prior stated media capacities. This form allows parents/guardians the option to NOT allow the media or Flex IT Academy to take photos/video of your minor children. To exercise this option, check above and provide the information requested within five (5) days of student enrollment. NOTE: If opted out, a student's "no media" status remains active throughout his/her enrollment in at Flex IT Academy. To change this status, a parent/guardian must notify the office of his/her child's campus.

Sign and Return **ONLY IF** opting out



Flex It Academy focuses on education and behavioral skills. We take pride in assisting our students in achieving their goals and aspirations. Here at Flex It Academy, we provide a unique learning environment and an exciting curriculum. We believe that all children are inquisitive and enjoy learning. It is our job to give them the right tools to achieve their goals. Creating a learning plan that is flexible to their needs, enables them to feel confident, enjoy learning and succeed.

Services:

Individualized learning with a virtual or in person teacher (All Teachers are Certified)

Social/Emotional Regulation Support

ABA (Applied Behavior Analysis)

Tutoring

Related Services: Occupational Therapy & Speech and Language

All subjects taught; Reading, Writing, Math, Science and Social Studies

On school campuses, we will provide STEM Project Based Learning and Social Skills Class

Fees:

\$65.00/hr. Tutoring/Homeschooling

\$90.00/hr. Speech and Language Pathologist

\$120.00/hr. Occupational Therapy and ABA

\$90.00/hr. Music Therapy

Call for tuition rates Tuition includes education and related services



2019-2020 Campus School Calendar

August 9 & 12	Teacher PD/Prep
August 13	Open House
August 14	First Day of School
September 2	Labor Day (No School)
October 14 – October 18	Fall Break (no school)
November 1	End of Semester
November 4	Parent/teacher conferences (no school)
November 11	Veteran's Day (no school)
November 27 – 29	Thanksgiving Break (no school)
December 23 – January 3	Winter Break (no school)
January 20, 2020	Martin Luther King Holiday (no school)
February 17, 2020	President's Day (no school)

March 16 – 20	Spring Break (no school)
April 10	Good Friday (no school)
May 15	Parent/teacher conferences (no school)
May 19	End of Semester
May 20	Last Day of School
May 21	Last Day for teachers
Summer Program Schedule:	
May 29	Teacher Prep
June 1	First Day for Students
June 25	Last Day for Students
June 26	Last Day for Teachers
July	No School