



## Tuition and Fees

**Tuition \$1,459.00**

Registration fee	\$289.00	<div></div>
Tuition	\$1170.00	<div></div>
Per credit hour	\$69.00	<div></div>
Book Fee	\$368.00	<div></div>
If materials are not returned in good condition		
Tutoring per session	\$25.00	<div></div>
Test retake per section	\$55.00	<div></div>
Credit/Debit card Fee	\$5.00	<div></div>
Packet replacement	\$129.00	<div></div>
Transcript replacement	\$25.00	<div></div>
Diploma replacement	\$96/55.00	<div></div>
Postal Fee	\$23.00	<div></div>

Name \_\_\_\_\_ Date \_\_\_\_\_



## Carra Academy Tuition Payment Plans

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<b>Registration fee must be paid with all plans</b>	\$289.00	
Full tuition \$1170.00 ( <b>\$50.00 discount/Paid in full</b> )	\$1120.00	
High School Diploma	\$96.00	
<b><u>Late fee:</u> 30 days late</b>	<b>\$25.00</b>	
45 days late	<b>\$50.00</b>	
60 days late		
	<b>Termination</b>	

### REFUND POLICY

Carra Academy High School **does not offer any refunds** for registration, tuition or any other fees under any circumstances.

### NO TOLERANCE POLICY

Carra Academy has zero tolerance for the use of profanity, verbal threats, weapons, alcohol and illicit drugs on school grounds or school events. All actions are grounds for expulsion.

### 180 Day Policy

The student must complete final exams in 180 days   
Tuition must be paid in full before final exam can be taken   
Failure to comply with this policy may lead to termination from the program

Name  Date



**Congratulations on your decision to change your life!**

Thank you for your interest in CARRA ACADEMY HIGH SCHOOL. Completing this application for enrollment is the first step toward completing your high school education. Take the first step towards a new career or take your current job to the next level.

Please be advised that college acceptance is at the discretion of the receiving institutions. We are in the process of networking with colleges in order to make your transition easier.

**The staff of Carra Academy High School welcome you!**

The signature of a parent is necessary for students 16 years of age and younger in order to complete this application and high school exam.

Student Name\_\_\_\_\_

Student Signature\_\_\_\_\_ Date\_\_\_\_\_

Parent Signature\_\_\_\_\_ Date\_\_\_\_\_



## Carra Academy Student Information

Last Name:

First Name:

Middle Name:

Birthdate:

Age:

Gender:

- ☐ Male  
☐ Female

Address:

City:

State:

Zip:

### Federal Ethnicity/Race

Federal Ethnicity Category:

- ☐ Hispanic  
☐ Non-Hispanic

### Federal Race Category:

Check all that apply

- ☐ American Indian or Alaska Native  
☐ Asian  
☐ Black  
☐ Native Hawaiian or other Pacific Islander  
☐ White



## Parent/Guardian Contact Information

Last Name:

First Name:

This Parent is:

Email:

Primary Phone:

Parent Name:

(Check all that apply)

- ☐ should be contacted in emergencies
- ☐ gets mailings for students
- ☐ live with students.
- ☐ has permission to pick up students from school

Address 1:

State:

Zip:

\* Email:

\* Please Re-Enter Email:

\* Primary Phone:

Alternate Phone:

This parent...:

(Check all that apply)

- ☐ should be contacted in emergencies only
- ☐ gets mailings for students
- ☐ live with students.
- ☐ has permission to pick up students from school



## **Emergency Contacts**

Note: Parents are required to submit a hard copy of the Emergency Contact Form in order for any individual listed as an Emergency Contact to pick a student up from school. Emergency Contact forms will be provided

### **Emergency Contact #1**

Last Name:

First Name:

Primary Phone:

Relationship to Student:

This contact has permission to pick up the student from school.

☐ Yes    ☐ No

### **Emergency Contact #2**

Last Name:

First Name

Primary Phone:

Relationship to Student:

This contact has permission to pick up the student from school.:

☐ Yes    ☐ No



## **Emergency Contact #3**

Last Name:

First Name:

Primary Phone:

Relationship to Student:

This contact has permission to pick up the student from school.:

☐ Yes ☐ No

## **Previous School Information**

Which school are you currently attending or transferring from:

City:

State:

School Type:

## **Home Language Survey**

Home Language:

Birth Country:

Is a language other than English spoken at home?

Does the student speak a language other than English?

## **Immigrant Information**

Skip to next section if student was born in the U.S.

Date of first school enrollment in the U.S.:

Years of education completed in the U.S.:

Date first entered U.S.:

Does the student have refugee status?



☐ Yes ☐ No

If yes, from which nation?

## **Programs**

- Is the student currently receiving any type of Special Education Services?

☐ Yes ☐ No

Please contact Christian Jamison at 708-991-7281 with any questions. By submitting you certify that all the information provided is correct and complete to the best of your knowledge.





- Complete the Admissions & Placement Exam.
- (DO NOT WRITE IN THE EXAM BOOKLET)
- Return all books, material and exam booklet and answer the sheet to: 4747Lincoln Mall Dr. Suite 410 Matteson, Illinois 60443
- Provide us a copy of your Social Security Card, State I.D. and Birth Certificate.
- Sign and Initial all highlighted areas.
- If your handwriting is not legible, you can type your answers.
- Please return your packet in good condition.
- You have 6 months to complete your exam.
- All tuition payments must be made on time.
- Tuition must be paid in full before your test can be turned in.
- **All books must be returned.**