



Uchenna Academy | Reach Ahead Request Form

Policy Statement: Under certain circumstances, an individual student in Grade 8, with parental consent, may be given permission by the principal of a secondary school to “reach ahead” to take secondary school courses, either during the school year or in the summer prior to entering Grade 9. The principal of the secondary school assumes responsibility for evaluating the student’s achievement and for granting and recording the credit.

The following information must accompany this form:

- Ontario Student Transcript or Grade 8 report card
- Individual Education Plan (I. E. P.) if student has one

STUDENT INFORMATION

First Name: _____

Last Name: _____

Date of birth: Yr. _____ Mo. _____ Day _____

Health Information

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetic, Asthma, Seizures).

<u>Medical Problem</u>	<u>Required treatment</u>	<u>Should paramedic be called?</u>
_____	_____	Yes/No
_____	_____	Yes/No
_____	_____	Yes/No

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?
Yes__ No__ If yes, explain: _____

Is your child allergic to any type of food or medication?

Yes__ No__ If yes, explain: _____

Does your child require a special diet?

Yes__ No__ If yes, explain: _____

ELEMENTARY SCHOOL INFORMATION

School Name: _____

Principal Name: _____

Contact Number: _____

Principal Email: _____

SECONDARY SCHOOL INFORMATION

School Name: _____

Principal Name: _____

Contact Number: _____

Principal Email: _____



PAYMENT

PROGRAM FEE IS \$950. A DEPOSIT OF \$200 MUST BE PAID UPON SUCCESSFUL REGISTRATION IN ORDER TO RESERVE A PLACE. THE REMAINING BALANCE IS DUE UPON COMMENCEMENT OF THE PROGRAM. FINANCIAL ARRANGEMENTS MAY BE REQUESTED AND ARE APPLICABLE UPON APPROVAL OF THE UCHENNA ACADEMY PROGRAM DIRECTOR.

VISA or MC EMT (send to info@uchenna.ca) DEBIT CASH CHEQUE ENCLOSED

CARD NUMBER	EXPIRY	AMOUNT
NAME ON CARD		CARDHOLDER SIGNATURE

NOTE: UCHENNA ACADEMY WILL RETAIN THE CREDIT CARD INFORMATION FOR ANY OUTSTANDING BALANCES INCURRED WHILE THE STUDENT IS ENROLLED IN A PROGRAM AT QSLA

TERMS AND CONDITIONS

- CANCELLATIONS MUST BE MADE IN WRITING TO UCHENNA ACADEMY – Attention: Program Director.
- FEES ARE FULLY REFUNDABLE UP UNTIL 30 DAYS PRIOR TO THE PROGRAM START DATE.
- WITHIN 30 DAYS OF THE PROGRAM START DATE OR THEREAFTER, NO REFUND WILL BE ISSUED.
- PROGRAM FEES MUST BE PAID IN FULL IN ORDER TO PARTICIPATE IN ANY SPECIAL EVENTS.

AUTHORIZATION TO CAPTURE AND USE PHOTOGRAPHS

I consent to the use of photographs of _____ (name of child or self) as part of Uchenna Academy’s programs. These photos may be used on Uchenna Academy and their professional affiliates’ websites. The photos will serve the following purpose(s): to engage other youths and other GTA communities into the various programs developed by Uchenna Academy staff, raise awareness about Uchenna Academy programs and initiatives. I agree that I shall have no claim against Uchenna Academy, their professional affiliates or against anyone accessing this product, whether online, in print or by any other means.

If an offer for participation at Uchenna Academy is accepted by the student candidate, the undersigned hereby agrees to pay QSLA all fees and charges which shall at any time hereafter become due and payable in respect of such student.

Parent/Guardian Signature: _____ Date: _____

SEND THE COMPLETED REGISTRATION FORM TO:

MAIL:

Uchenna Academy
1205 St. Clair Ave. W. Suite 106
Toronto, ON
M6E 1B5

EMAIL: info@uchenna.ca