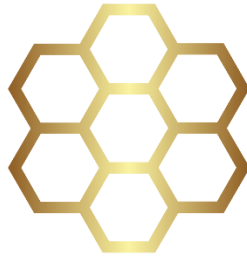


**required documents**

- enrollment form
- previous school transcript (high school)
- previous school report cards (middle school)
- photocopy of student's identity document



**THE HIVE ACADEMY**  
T H R I V E & S T R I V E

**Enrollment Form**  
**2023 – 2024 School Year**

**STUDENT ENROLLMENT INFORMATION**

**Student's Basic Information**

Legal Name (First, Middle, Last) \_\_\_\_\_

Birth Date (MM/DD/YYYY) \_\_\_\_\_ Sex \_\_\_\_\_

Birth Country \_\_\_\_\_ Nationality \_\_\_\_\_

Grade Level for 2022-2023 \_\_\_\_\_

Phone Number (to contact the student directly) \_\_\_\_\_

E-mail \_\_\_\_\_

Home Address \_\_\_\_\_

\_\_\_\_\_

**Activities**

Sport/s \_\_\_\_\_

Art Activities \_\_\_\_\_

Hobbies \_\_\_\_\_

Activities the student plans to do in the afternoons. Where?

- Mondays \_\_\_\_\_
- Tuesdays \_\_\_\_\_
- Wednesdays \_\_\_\_\_
- Thursdays \_\_\_\_\_
- Fridays \_\_\_\_\_

**Language Survey**

Primary language spoken at the student's home \_\_\_\_\_

Primary language spoken by the student \_\_\_\_\_

Other languages spoken by student \_\_\_\_\_

Language that the student first acquired \_\_\_\_\_

Language/s that the student learnt/studied \_\_\_\_\_

Language/s that the student would like to learn \_\_\_\_\_

## PARENT/GUARDIAN INFORMATION

### Primary Contact

First and Last Name \_\_\_\_\_ Relationship to student \_\_\_\_\_

E-mail \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ (circle one) **Cell / Home / Work**

Alternative Phone Number \_\_\_\_\_ (circle one) **Cell / Home / Work**

Address if different to students' \_\_\_\_\_

Responsible for parenting? **Yes / No**

Lives with student? **Yes / No**

To contact in an emergency? **Yes / No**

To receive report cards? **Yes / No**

To sign up on online gradebook? **Yes / No**

To receive invoices? **Yes / No**

### Additional Contact Information 1

First and Last Name \_\_\_\_\_ Also primary contact? **Yes / No**

Relationship to student \_\_\_\_\_ E-mail \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ (circle one) **Cell / Home / Work**

Alternative Phone Number \_\_\_\_\_ (circle one) **Cell / Home / Work**

Responsible for parenting? **Yes / No**

Lives with student? **Yes / No**

To contact in an emergency? **Yes / No**

To receive report cards? **Yes / No**

To sign up on online gradebook? **Yes / No**

To receive invoices? **Yes / No**

### Additional Contact Information 2

First and Last Name \_\_\_\_\_ Also primary contact? **Yes / No**

Relationship to student \_\_\_\_\_ E-mail \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ (circle one) **Cell / Home / Work**

Alternative Phone Number \_\_\_\_\_ (circle one) **Cell / Home / Work**

Responsible for parenting? **Yes / No**

Lives with student? **Yes / No**

To contact in an emergency? **Yes / No**

To receive report cards? **Yes / No**

To sign up on online gradebook? **Yes / No**

To receive invoices? **Yes / No**

## RECORDS INFORMATION

### Schooling Background

The most recent school the student attended was:

(circle) **A public school / A private school / An online school / homeschooling**

School Name \_\_\_\_\_

City and Country \_\_\_\_\_

Grade level/s during enrollment at this school \_\_\_\_\_

Last day of attendance \_\_\_\_\_

Names of other schools the student has attended and grade level/s \_\_\_\_\_

\_\_\_\_\_

Has the student skipped any grade level? **Yes / No**

Has the student ever received Special Education Services? **Yes / No**

Has the student been expelled from a previous school? **Yes / No**

Has the student been suspended from a previous school? **Yes / No**

If yes, please explain \_\_\_\_\_

Has the student been bullied at a previous school? **Yes / No**

Has the student been absent from school for more than 3 consecutive days? **Yes / No**

### Medical/Health Details

Does the student suffer from any of the following? If yes, please specify.

Allergies **Yes / No** \_\_\_\_\_

Speech impairment **Yes / No** \_\_\_\_\_

Asthma **Yes / No** \_\_\_\_\_

Hearing impairment **Yes / No** \_\_\_\_\_

Visual impairment **Yes / No** \_\_\_\_\_

Behavior issues (e.g. depression, ADHD) **Yes / No** \_\_\_\_\_

Physical disability **Yes / No** \_\_\_\_\_

Learning impairment **Yes / No** \_\_\_\_\_

Diabetes **Yes / No** \_\_\_\_\_

Other **Yes / No** \_\_\_\_\_

Is the student on any medical treatment? **Yes / No** If yes, please specify \_\_\_\_\_

\_\_\_\_\_

Please provide any other necessary information

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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## SCHOOL FEES

**Middle School (Grades 6 – 8): 11,000€** • **High School (Grades 9 – 12): 12,000€**

**1000 €** non-refundable to be paid at enrollment.

Please choose the school fee payment arrangement:

- The school fees will all be paid in August/September.
- The school fees will be paid twice a year (August/September and January)
- Another arrangement \_\_\_\_\_

## AFTERNOON ACTIVITIES / OPTIONS / ELECTIVES

Please choose the afternoon activities you would like to sign up for:

*No extra fees:*

- Drama
- Public Speaking
- Creative Writing
- Extra Support in Core-Courses (English, Math, Science, Social Studies (History / Civics / Economics), French
- Study Support (work ethic, time management, note-taking, independent work, research)
- MUN (High School)

*Students who sign up for Drama and Public Speaking may take the New Era exams at the school.*

*500 Euros/semester*

- Chinese
- Italian
- Spanish
- Russian
- Extra French
- Art
- Photography
- Self-Defense
- Guitar
- Computer Science

*250 Euros/semester*

- Yoga
- Fitness / Multi-Sports

*800 Euros/semester*

- Piano

Other classes we might have depending on the demand:

- German

Other activities you may suggest: \_\_\_\_\_

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### **PHOTOGRAPH/VIDEO PERMISSION**

Students may be photographed or filmed while participating in school programs or other activities. The photographs/videos as well as students' work (art pieces, speeches, presentations, poems etc) may be used/publicized for educational, promotional or editorial purposes on our websites, social media and for brochures or other documents advertising our school.

Do you grant permission to the school to publish photographs or videos of your child? **Yes / No**

Do you grant permission to the school to publish your child's work? **Yes / No**

## EXPECTATIONS

The Hive Academy is dedicated to providing a safe and inspiring learning environment to the students, as well as a good working environment for the staff. Please read the following expectations with your child and sign the document. Our students and the School will discuss these expectations at the start of the year.

1. Students will respect one another and the school staff.
2. Students will respect and obey the French law and will not engage in illegal activities such as theft, violence, possession or use of alcohol, drugs, weapons, vandalism, abuse.
3. Students will make consistent progress during the school year towards promotion to the next grade level.
4. Parents will follow their children's progress and communicate any concerns to the school.
5. Parents and students will respect the school calendar and the school hours and shall communicate any absence or lateness to the school.
6. Students will respect the privilege of education and will not engage in any sort of academic misconduct such as plagiarism, cheating and lying.
7. Students will limit the use of computers, any other electronic devices and the internet to academic purposes and will not have phones during the school hours unless authorized to do so by the school staff.
8. Parents and students will make sure students have all the necessary school supplies at all times.
9. Students and parents will commit to students undertaking a minimum of 4 hours of structured physical activity.
10. Parents will respect the school fees payment arrangement agreed upon with the school.

Your signatures confirm that the information on this enrollment form is correct, and demonstrate that you approve the expectations and are willing to abide by them.

Signature of Parent /Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

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