

- New Application
 Re-Admission
 Male Female

THE TIMMERMAN SCHOOL, INC.
 2219 Atascadero Drive • Columbia, South Carolina 29206 • (803) 782-2748

- Parents Marital Status
 Married
 Divorced
 Single
 Guardian

CONTRACT

Please neatly print

We hereby make application for admission of: _____
 (Legal Names) Last Name First Name Middle Name Preferred Name Grade Applying for

to The Timmerman School as a student for the school year 20 _____ - 20 _____

Date of Birth _____ Age _____

Resides at _____
 Number Street City Zip Telephone

<u>New application ONLY-</u> Last School Attended _____	
Address _____	Grade completed _____
City _____	State _____ Zip _____
Has child ever been denied admittance to or been expelled or suspended from a school? _____ If yes, please attach explanation.	

Father's/Guardian's name: _____ Address _____ Occupation: _____
 First Last

Business Name _____ Cell Phone _____ Business Phone _____

Father's email: _____ Mother's email: _____

Mother's/Guardian's name: _____ Address _____ Occupation: _____
 First Last

Business Name _____ Cell Phone _____ Business Phone _____

Alternate person to call in an emergency: Name: _____ Phone _____

Physician and number _____ Allergies _____

Will you need extended care Yes No Will school personnel have permission to administer medication if necessary? Yes No

I hereby give permission for my child to go on school sponsored field trips. Yes No

Brothers or sisters at Timmerman: _____ Grade _____

_____ Grade _____

Has the child ever been under psychiatric care or treated for any emotional disturbance? _____

I (we) consent and agree that The Timmerman School shall have the right to determine class assignment, to accept or not accept the applicant as a student as the school desires, to suspend or expel the child for any scholastic or disciplinary reason or cause, and the school shall be the sole judge of the sufficiency of such reason or cause.

The parents or guardian and the child will, upon request, appear for a personal interview with school administration before action on this application can be expected.

Any willful misrepresentation on the part of any applicant voids the contract and precludes any future consideration for admission.

I (we) understand that the school reserves the right to dismiss any student whose general attitude or habitual actions are contrary to the interests of the school, for example: habitual falsehood, stealing or cheating, the possession of alcohol, drugs or tobacco while on school property, willful destruction of property, leaving the campus without permission, disrespect to school authority and failure to follow school rules. We agree to discuss and abide by school rules and regulations as stated in the Student/Parent Handbook.

If this application is accepted by Timmerman School, I (we) understand that this agreement becomes a **BINDING CONTRACT** which cannot be revoked or rescinded by me (us) and I (we) agree to pay the entire and full tuition fee for the year **WITHOUT REFUND**, regardless of any circumstance. Timmerman School does not guarantee protection from any communicable disease including, but not limited to, COVID-19.

I (we) have read the above and fully understand and agree with the admission policy stated. Timmerman School does not discriminate on the basis of race, religion, or nationality.

 Signature of Parties Responsible for the Account Date

Tuition - Due on the first of the week/month
 Ex/care - Due weekly

I understand my monthly payment for _____ months will be \$ _____

I understand my weekly payment will be \$ _____

Accepted _____
 For Timmerman School Date

FOR OFFICE USE ONLY:

Application Fee \$ _____ FOP _____ Date _____

Balance \$ _____