



Nanaimo Christian School

STUDENT PARTICIPATION AGREEMENT

Nanaimo Christian School wishes to provide a challenging program for students studying in our school. Our prayer is that students will grow in their faith and find out what it means to live in a global community. There are, however, certain expectations of students who are enrolled in our program. These expectations include important obligations on the part of each student accepted for study at our school. Each student and the guardian or parent/s of each student that is accepted into our program must read the following statement and must, by signing it, agree to be bound by and to honour its terms.

1. Law, Rules and Regulations

I agree that I will abide by all the laws of Canada, the Code of Conduct/Home-stay Guidelines and policies, as outlined in the Student Handbook of the school. In particular, I understand that the unlawful use of drugs will not be tolerated and that alcohol use is also forbidden in all circumstances. I understand that violation of the above will result in my dismissal from the school. I understand that in the case of dismissal, I will be sent home at my parent's expense and that there will be no refund on tuition paid.

2. Home-stay (if not residing here with parent)

I appreciate that living in a home-stay environment provides me with an opportunity to develop friendships with individuals of a totally different culture. I acknowledge that it is mandatory for me to live with a home-stay family that has been approved and selected by the school. I will make every effort to make my home-stay experience a successful one. If problems do arise, I will attempt to resolve them with the parties involved. I understand that the International Student Coordinator will be available for me if I require assistance.

While living with a home-stay family, I will obey family rules and show respect for other family members. I will attend a Christian church on a regular basis and will make every attempt to participate in its programs.

3. Parents Residing with their Children

I understand, as the parent of my child/ren enrolled in the International Student Program, that according to Provincial/Federal laws all children under the age of 18 must live with a responsible adult. I understand that if I wish to visit my home country, or otherwise be away from my child/ren, I will inform the International Student Coordinator of my plans by submitting a Parental Absence Form before departure and will arrange for a responsible adult to live with my child/ren while I am away.

4. Attendance

I understand and accept the obligation to attend all classes in the educational program provided to me. I understand that there must be a note from my parent/home-stay parent to explain all absences and that unexplained absences may lead to my dismissal from the program.

5. Travel

I agree that I will not make overnight trips unless I am accompanied and supervised by an adult. I agree that the International Student Coordinator should approve all such travel.

6. Refund Policy

In the event that I am unable to obtain a Student Authorization, or decide not to attend, or to leave the International Education Program, I agree that only a portion of the paid tuition fee will be refunded. In all cases, the application fee will be retained to cover administrative expenses. The following refund policy will apply for each school year for which a student is registered:

- a. Full refund except the Application Fee, if the Student Authorization application is not approved. (Original copy of rejection letter from the Embassy is required.)
- b. If the student withdraws prior to date of enrolment, two-thirds of the tuition is refundable.
- c. If the student withdraws within one month of admittance, one-half of the tuition is refundable
- d. No refund on fees after one month of attendance at school.

Medical Authority and Release

I, as parent/guardian of the undersigned student do hereby authorize the school staff and the sponsoring home-stay parents to consent to any x-ray examinations, anaesthetics, medical or surgical diagnosis or treatment or hospital care which is deemed advisable by, and is rendered under the general supervision of any licensed physician or surgeon, whether such treatment or diagnosis is rendered at the office of said physician or surgeon or at a hospital.

It is understood that this authorization is not given in advance of any specific diagnosis, treatment or hospital care being required, but is given to provide authority and power on the part of the school to give specific consent to any all such diagnoses, treatment or hospital care which the aforesaid mentioned physician or surgeon in the exercising of his/her best judgment may deem advisable.

General Release

I, the undersigned, do waive and release all claims against the school for the injury, loss, damage, accident, delay or expense resulting from the applicant's participation in the International Education Program. I also release the school and agree to indemnify them, with regard to any financial obligations or liabilities that the applicant may personally incur, or any damage or injury to the person or property of others that the applicant may cause while participating in the International Education Program.

I understand that the school is not responsible for any loss or injury suffered by the applicant during periods of travel. If the applicant becomes ill or incapacitated, the school may take such actions as it considers necessary, including securing medical treatment and transporting the applicant home at his or her own expense. I release the school from all liability related to such actions. I understand that the applicant's participation in the Program may be terminated at the discretion of the Principal without any refund of fees, and that the applicant may be sent home at his or own expense if he or she does not adhere to the school's guidelines and rules as set out by the Code of Conduct, Student Handbook and the Participation Agreement.

I have read the above and agree to fulfill all my obligations as set out. I also agree to both the medical release authorization and to the agreement and release clause.

Name of Student	Student's Signature	Date
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I/we the parents/guardians of the student signing above have read all the above including both the medical release authorization and the agreement and release and I/we agree that we will use our best efforts to ensure that our child honours all the obligations set out and we agree to be bound by the release and authorizations.

Name of Parent/Guardian	Parent/Guardian's Signature	Date
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Witness	Signature	Date
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