

Authority: FOOTPRINTS FOR LEARNING SOCIETY

School: FOOTPRINTS FOR LEARNING CHARTER ACADEMY

Last Updated: July 17, 2024

HOLISTIC AUTHENTIC PURPOSE DRIVEN ENTREPRENEURIAL GLOBAL

INTERNATIONAL STUDENTS POLICY

How to Apply to Attend FLCA

Space is limited so students are encouraged to apply early to help ensure their choice of school and community. The following steps will guide you through the application process:

1. Complete the FLCA International Student Application Form. In addition to submitting a completed application form, applicants will need to provide several other pieces of documentation.
2. Study Permit Application: to study in Canada, students need to apply for a study permit. their country.
3. Medical Insurance: all international students are required to pay for medical coverage as a condition of their acceptance into the FLCA International Student Program.
4. Student Fees: Please review the overview of student fees, and the circumstances that they are applicable.

Study Permit

If you want to study in Canada, you need to obtain a study permit. FLCA will issue a "Letter of Acceptance" for this purpose upon receipt of the application form, application fee, all required supporting documentation and full tuition. When an international student arrives in Canada for the first time or renews their study permit, they must provide the school with a copy of the new valid study permit. To apply for an international student's initial study permit from outside of Canada, visit: <https://www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/study-permit/apply.html>

Please note that your letter of acceptance will indicate the length of study you pay for and you will need to ensure your study permit is valid.

Medical Coverage - A Comprehensive Policy

All international students are required to pay for medical coverage as a condition of their acceptance into the FLCA International Student Program. FLCA will look into a mandatory private student health insurance plan that must be paid at the same time as tuition. Benefits are to include: physician's fees for medically required services, hospitalization, X-rays and diagnostic tests, prescription medication, ambulance service, accidental dental care and repatriation of deceased. Pre-existing conditions are covered unless they have developed only in the three months previous to the start of the insured period. A copy of the student's passport and student visa (if applicable) is required in order to apply for medical coverage.

Alberta Health Care

International students must register for the Alberta Health Care Insurance Plan within three months of their arrival. If the international student is under the care of a legal guardian, the family may register the student under its health plan. For full details visit: <https://www.alberta.ca/health>

GENERAL REGISTRATION INFORMATION

- 1) The following documents are required for registration:
 - a) A signed International Student Application Form;
 - b) A copy of the student's passport (picture page);
 - c) A copy of the student's birth certificate;
 - d) School/Academic records for last two (2) years translated into English (copies must have an official school stamp);
 - e) Letter of Recommendation from the current teacher or principal translated into English;
 - f) Letter stating your intent as to why you are choosing to study in Canada; what you hope to achieve. For example, to improve English, to achieve your Grade 12 diploma or pursue a Canadian post-secondary education; and
 - g) Custodianship documents (if student's parent is appointing a custodian) (See below.);

- 2) Official Letter of Acceptance and Study Permit Application
 - a) Once a student's application has been accepted, an Official Letter of Acceptance (LOA) will be issued along with the invoice for payment of applicable Tuition and Health Insurance Fees.
 - b) The LOA is required for the student to apply for a Study Permit at the nearest Canadian Embassy.

- 3) Payment of Tuition & Health Insurance Fees
 - a) Fees are due upon receiving the invoice and can be paid by cash (locally), cheque or wire transfer. Additional service charges may apply.

- 4) Custodian Appointment
 - a) A custodian must be appointed for students not living with a parent.
 - b) Custodian and Parent Declaration forms must be notarized and copies provided with the application (2 copies are required for Rocky View Schools). Form is attached to this document.
 - c) FLCA requires all students to have a valid Study Permit. See this link for completion: [https:// www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/study-permit/apply.html](https://www.canada.ca/en/immigration-refugees-citizenship/services/study-canada/study-permit/apply.html)

- 5) Upon arrival in Canada
 - a) It is suggested that students arrive one week prior to the first day of school to provide time for registration and adjustment. Please register at the school as soon as possible (bring acceptance letter/ passport & study permit)

TUITION FEES (PAYABLE TO FOOTPRINTS FOR LEARNING SOCIETY)

- All fees are in Canadian dollars and are subject to change without prior notice
- All applicable fees must be paid in full prior to student commencing school

| Fee | Fee Amount |
|---|---|
| Application Processing Fee <ul style="list-style-type: none"> • One-time only and <u>non-refundable</u> • Applicable to all applicants regardless of length of program | \$300 |
| Tuition Fees Grade 1 – 12 Kindergarten Fees must be paid in full prior to student attending classes | \$5,000 per semester. |
| Medical Insurance | \$ 500 per year estimate |
| School Fees The parents or guardians are responsible to pay all school- established optional <u>course fees</u> and school-established optional <u>program fees</u> if applicable, to the school the student is attending. | Outlined in the School Handbook for Field Trips, Sport Teams, Supplies, and Electives. |
| Grade 12 Alberta Diploma Exam fees (<u>Alberta Diploma Exam</u>) | Payable to FLCA upon notification from Alberta Education as to the amount to be charged, if applicable |
| Bank Fees | \$50 charge added to total invoice If paying by wire transfer. |
| Tuition Fee Refund Policy <ul style="list-style-type: none"> • A full refund of tuition fees (less \$250 fee) if study permit is denied by Citizenship & Immigration Canada before the June before the start of the school year. • No refund of the tuition fees if registration is canceled prior to the start of the program • No refunds provided after student has commenced his/her education program with FLCA, or is removed from the International Student Program by FLCA for any reason | |

Please send completed application to:

Footprints for Learning Charter Academy

Attention: Principal

102 2926 Kingsview Blvd Airdrie,

AB CANADA T4A 0C9

Email: hello@footprintsforlearning.com

For Office Use Only:

School

Grade

Referred by: _____

Please PRINT clearly in English

Date: _____

Program Commencing: September or January

| STUDENT INFORMATION | | |
|--|--|---------------------------|
| LEGAL LAST NAME: | LEGAL FIRST NAME: | LEGAL MIDDLE NAME: |
| ENGLISH NAME (IF APPLICABLE): | BIRTH DATE: ____/____/____ MONTH DAY YEAR | MALE FEMALE |
| COUNTRY OF BIRTH: | LANGUAGE SPOKEN: | |
| STUDENT EMAIL: | STUDENT CELL PHONE: | |
| ENTERING GRADE: | | |
| PARENT INFORMATION | | |
| FATHER FULL LEGAL NAME: | MOTHER FULL LEGAL NAME: | |
| PERMANENT OVERSEAS ADDRESS: | | |
| CITY, COUNTRY, POSTAL CODE: | | |
| HOME PHONE: | FATHER CELL/MOBILE PHONE: | MOTHER CELL/MOBILE PHONE: |
| FATHER EMAIL: | MOTHER EMAIL: | |
| SCHOOL HISTORY/ SCHOOL REQUESTED: | | |
| SCHOOL REQUESTED: NO PREFERENCE, PLEASE ASSIGN | 1: | 2: |

STUDENT NAME: _____ **DATE OF BIRTH (YY/MM/DD):** _____

| LIVING ARRANGEMENTS AND ADDRESS | | | |
|--|-------------|-------------|--------------|
| <input type="checkbox"/> Student will live with mother/father at address indicated above (no custodian required) | | | |
| <input type="checkbox"/> The student will live with the following person; they will also be the student's custodian: | | | |
| SURNAME (FAMILY NAME): | | FIRST NAME: | Ms. Mrs. Mr. |
| RELATIONSHIP TO STUDENT: | | | |
| STREET ADDRESS: | | CITY: | POSTAL CODE: |
| HOME PHONE: | WORK PHONE: | CELL PHONE: | EMAIL: |
| HEALTH INFORMATION | | | |
| Does the student have any allergies, medical conditions or take any medication? | | | Yes No |
| If YES , please describe: | | | |
| | | | |
| | | | |
| Does the student have a perceived or documented learning disability, physical disability, social integration difficulty, behavioural concern or history of criminal behaviour? | | | Yes No |
| If YES , please describe: | | | |
| | | | |

Terms & Conditions:

In the event that a student does not come to FLCA or decides to leave, a request for a refund must be made in writing.

Footprints for Learning Society is not liable for losses/expenses that may incur as a result of the school being unable to provide education owing to labour disputes, inclement weather conditions or other causes beyond its control. Canada is very safe by world standards. While the student will be generally supervised, such supervision cannot be constant and the school cannot guarantee the student's safety. Therefore, should the student be injured while studying in Canada, the school will not be held liable.

If the student's educational needs are greater than disclosed on the application, FLCA reserves the right to charge for extra support if such support is available. Any inaccuracy in the application may be sufficient reason for the Division to terminate the agreement and send the student home without refund and at the parent's own expense.

I confirm that I am applying to attend Footprints for Learning Academy (FFLA) as an international student. I agree to uphold the Rules of FFLA & Regulations and cooperate with administrators, teachers and students.

STUDENT NAME:

DATE:

STUDENT SIGNATURE:

As the parent(s) of the student applying for placement, I/we acknowledge acceptance and understanding policies and guideline requirements for placement.

PARENT(S)/GUARDIAN NAME(S):

PARENT(S)/GUARDIAN NAME(S):

STUDENT SIGNATURE:

CUSTODIANSHIP DECLARATION – CUSTODIAN

STUDENT Information

| | | | |
|---------------------|-------------|-------------------------------|--|
| Student's full name | Citizenship | Date of birth (dd/mm/yyyy) | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female |
|---------------------|-------------|-------------------------------|--|

Name and address of school in Canada

Address where student will reside in Canada

PARENTS/GUARDIANS Information (Preferably from both parents/guardians)

| | Parent/Guardian 1 | Parent/Guardian 2 |
|----------------------------|-------------------|-------------------|
| Full name | | |
| Date of birth (dd/mm/yyyy) | | |
| Home address | | |
| Telephone number | | |

CUSTODIAN Information

| | | |
|-----------|---|-------------------------------|
| Full name | Status in Canada <input type="checkbox"/> Canadian citizen or <input type="checkbox"/> Permanent resident | Date of birth (dd/mm/yyyy) |
|-----------|---|-------------------------------|

Home address

Telephone number

The application of the official seal below confirms that the notary public has received evidence that the custodian is a Canadian citizen or a permanent resident, is over 19 years of age, and currently resides at the home address stated above.

I, _____ (name of custodian), hereby solemnly declare that I will undertake the full custodianship for the said student, _____ (name of student), during his/her stay in Canada, while under the age of majority in the province in which he/she resides. As a custodian, I have made the necessary arrangements for the care and support of the said student in place of the parents as appropriate. By signing this custodian agreement, I certify that I reside within a reasonable distance of the student's intended residence and school and will be able to fulfil my obligations as a custodian in the event of an emergency.

Signature of custodian:

Date: _____

Sworn before me at: _____ (city), in
the province of _____ (province/territory),
_____ country (if applicable)

This ____ day of _____ (month), _____ (year)

Signature of notary:

Official seal of Notary Public

CUSTODIANSHIP DECLARATION – PARENTS/GUARDIANS

STUDENT Information

| | | | |
|---------------------|-------------|-------------------------------|--|
| Student's full name | Citizenship | Date of birth (dd/mm/yyyy) | Sex <input type="checkbox"/> Male <input type="checkbox"/> Female |
|---------------------|-------------|-------------------------------|--|

Name and address of school in Canada

Address where student will reside in Canada

PARENTS/GUARDIANS Information (Preferably from both parents/guardians)

| | Parent/Guardian 1 | Parent/Guardian 2 |
|----------------------------|-------------------|-------------------|
| Full name | | |
| Date of birth (dd/mm/yyyy) | | |
| Home address | | |
| Telephone number | | |

CUSTODIAN Information

| | | |
|-----------|---|-------------------------------|
| Full name | Status in Canada <input type="checkbox"/> Canadian citizen or <input type="checkbox"/> Permanent resident | Date of birth (dd/mm/yyyy) |
|-----------|---|-------------------------------|

Current residential address

Telephone number

My/our child will reside: with the appointed custodian, in the school dormitory, or
 with another person _____ (please provide name and indicate relationship).

I/We, _____ and _____ (names of parents/guardians), the parents/guardians of the said student, _____ (name of student), hereby grant full custodianship to _____ (name of custodian), during the student's stay in Canada while he/she is under the age of majority in the province in which he/she resides. I have made the necessary arrangements for the care and support of the said student such that the custodian should act in the place of me/us, the parents. By signing this custodian agreement, I/we affirm that I am/we are satisfied the above appointed custodian resides within a reasonable distance of my/our child's intended residence and school and will be able to fulfil his/her obligations as a custodian in the event of an emergency.

Signature of parent/guardian (1): _____

Date: _____ Date: _____

Signature of parent/guardian (2): _____

Sworn before me at: _____ (city), in the
province of _____ (province/territory),
_____ country (if applicable)

This ___ day of _____ (month), _____ (year)

Official seal of Notary Public

Signature of notary: _____