2023 SPRING GRACE PROGRAM APPLICATION FORM

APPLICANT INFORMATION			
Name: (Family Name, Given Name)			English Name:
School Year:	Gender:	Date of Birth:	Age:
Term Applying for: ____Fall _Spring	Current Grade:	Place of Birth:	Country of Citizenship:
Date of Application:	Grade Applying For:	Residential Program Applying for: ____Homestay ____Dormitory	

STUDENT CONTACT INFORMATION			
Street Address:		Home Phone Number:	Cell Phone Number:
City:	State/Province:	Email Address:	Skype ID:
Postal Code:	Country:	Kakao Talk ID:	Etc:

FAMILY INFORMATION: PARENT(S) / LEGAL GUARDIAN(S)			
FATHER or Male Legal Guardian		**MOTHER or Female Legal Guardian**	
Full Name: (Last, First, Middle)		Full Name: (Last, First, Middle)	
Address:		Address:	
Home Phone:	Cell Phone:	Home Phone:	Cell Phone:
Work Phone:	Skype ID:	Work Phone:	Skype ID:
Email Address:	Kakao Talk ID:	Email Address:	Kakao Talk ID:
Place of Employment:		Place of Employment:	
Position:	Work Phone:	Position:	Work Phone:

Marital status of parents listed above:

____Married ____Separated ____Divorced _Never Married ____Living Together

If separated or divorced please explain legal custody and rights information:

CHILD GUARDIAN CONSENT FORM

School Years 2023

_____(Father's Name) of

_____(Address)

_____(Mothers Name) of

_____(Address)

Current legal parents of_____(Student's Name)

Born on_____/_____/_____(Students Birth date: MM / DD / YYYY),

Hereby appoint Joshua Kang (Principal) or a Represented Staff of Global Vision Christian School in case of urgent Medical Attention:_____(Represented Staff Name)

As legal guardian for my child for the period of time beginning of year 2023 and ending the year of 2028

The guardian shall have the right to:

1) Determine and authorize necessary medical attention
2) Provide necessary food, and shelter
3) Generally, act in loco parentis

My signature below shows my consent to the conditions of this agreement and guardianship of my child by the host family listed above.

Parent Signatures

Father Name (Please Print)	Signature	Date
Mother Name (Please Print)	Signature	Date

GLOBAL VISION CHRISTIAN SCHOOL · 1973 · BROADFORDING

GLOBAL VISION CHRISTIAN SCHOOL
BROADFORDING

NEW STUDENT APPLICATION FOR ADMISSION

REQUEST FOR ISSUANCE OF FORM I-20

Basic Information:

Family Name (Surname):	**First (Given) Name:**	**Middle Name:**	
Date of Birth (Month/Day/Year):	**Country of Birth:**	**Country of Citizenship:**	
I20 Issue Reason: Initial Attendance Transfer	**Program Start Date (Month/Day/Year):**	**Grade Applying For:**	**Gender:**
If you are currently in the United States, what is your visa type?			

Student Contact Information:

Address Line One:		**Address Line Two:**	
City:	**Province/Territory/State:**	**Zip/Postal Code:**	**Country:**
Student Email Address:			

I-20 Shipping Address:

Contact Name: Sumin Hong	**Company Name:** Anytour	**Phone Number:** +82)02-508-7803
Address Line One: B-508 Champs Elysees Center, 10, Seolleung-ro 90-gil	**Address Line Two:** Gangnam-gu	**City:** Seoul
Province/Territory/State: Seoul	**Zip/Postal Code:** 06192	**Country:** Republic of Korea

Is Saturday Delivery Ok? Yes No	**Is this a business or a residence?** Business Residence	**Name & Email Address of the person who should Receive the tracking number:** Won Je Jung wonje@gemgem.org

Name of person submitting this form:

Agency: Date:

Comments:

GVCS BROADFORDING OFFICE USE ONLY:

Global Vision Christian School/Broadfording Christian Academy

International Program Release of Liability & Other Authorizations

The Undersigned,_____(Parents/Guardians Names) (referred to in this document as "Parents") parent(s)/guardian(s) of_____(Student's Name) (referred to in this document as the "Student", hereby grant(s) custodial responsibility and the following authorization and powers to the school relative to the Student during the entire tenure of a Student's enrollment in Global Vision Christian School/Broadfording Christian Academy, (referred to in this document as "School"). The custodial responsibility of the School and the authorities, powers and responsibilities granted to the School under this document begin at the time the Student arrives in the United States. The custody of the Student by the School and the authorities, powers and responsibilities granted to the School under this document continue until the time the Student leaves the United States for the purposes of returning to the undersigned's custody on school leave times or following the Student's graduation from the Program or removal from the Program.

I. Purposes of this Grant of Custodial Responsibility, Authorization and Limited Power of Attorney

This Grant of Custodial Responsibility, Authorization and Limited Power of Attorney is intended for the persons who are parents or guardians of the Student (referred to henceforth as "Parents" in this document) to give the School the legal authority under applicable United States national and state law to act for those persons with regard to the Student during the time the Student is attending the Program. Some activities, such as the Student's immigration into the United States for the purpose of studying in the program, are subject to the laws of the United States. Many other things., such as the right to cause the Student to get medical care, and communicate with teachers and others involved in the education of the Student, are subject to the laws of the state, the part of the United States in which The School's residential accommodations for the Student are located. As a general statement, by signing this form, the Parents are allowing The School to take the actions the parents or guardians could take with regard to the Student if the Parents were with the Student during the Student's stay In the United States. This document describes the extent of the actions The School may take with regard to the Student in more detail below. It is important for the Parents to understand what powers and authorizations the Parents are giving to The School, and that the Parents agree to those powers and authorizations. The School will attempt to contact the Parents in a timely manner in the event of medical emergency, and will keep Parents informed of the Student's progress in school and in activities in which the Student participates. However, there will be times when The School needs to act as guardians in the interests of the Student. This document allows The School to determine those times and take those actions.

II. Specific Custody Statement, Authorizations, and Limited Power of Attorney

A. Statement of Custodial Responsibility. For the period the Student is enrolled in the Program, beginning and ending as described in the second and third sentences of the first paragraph of this document, the Parents give to The School temporary authority as custodian of the Student. Without limiting that grant of temporary legal authority under the state law, The School shall have the right, power, and authorization to make major and minor decisions concerning the Student Including, but not limited to, the Student's health, education and welfare. The School may delegate these powers as necessary to authorized adult supervisors with whom the Student resides while enrolled in the Program. The school may communicate with such supervisors as well as with any doctor or other person concerning the Student, the Student's health and education, including the Student's progress in the Student's studies.

B. Health Care Release. I/We hereby designate the School (which shall include any contracted dorm supervisors/host families/homestay providers) to act as the "Health Care Agent" for health care decisions for the minor because I am/we are not available to provide consent for medical treatment and surgical diagnostic procedures. The said Health Care Agent shall have the authority, without limitation, to make any and all health care decisions on the minor's behalf, including, without limitation, decisions regarding the withholding or withdrawal of life sustaining procedures. The Health Care Agent shall have the right to receive any and all medical information necessary to make informed decisions regarding the minor's health care, including any and all confidential medical information that I/we and/or the minor would be entitled to receive. I/We intend for the Health Care Agent to be treated as I/we would be with respect to the use and disclosure of the minor's identifiable health information or other medical records. This release authority applies to any information governed by the Health Insurance Portability and Accountability Act of 1996 (a/k/a HIPAA), 42 USC 1320d and 45 CFR 160-164 and M.G.L. c. 111, M.G.L. c. 112, and M.G.L. c. 123. I/We authorize the Health Care Agent to disclose any and all medical information to the School at which the student is enrolled on the minor's behalf. I/We authorize any physician, health-care professional, dentist, health plan, hospital, clinic, laboratory, pharmacy or other covered health-care provider, any insurance company and the Medical information Bureau, Inc. or other health-care clearinghouse that has provided treatment or services to the minor, or that has paid for or is seeking payment from me/us for such services, to give, disclose and release to the Health Care Agent, without restriction, all of the minor's individually identifiable health information and medical records regarding any past, present or future medical or mental health condition. The authority given to the Health Care Agent shall supersede any prior agreement that I/we may have made with the minor's health- care providers to restrict access to or disclosure of the minor's individually identifiable health information. The authority given to the Health Care Agent will not expire unless I/we revoke the authority in writing and deliver it to the minor's health-care provider or until the earliest of the following: The minor reaches the age of 18, marries, or is emancipated; Revocation of the health care proxy by a court of law; or Termination or completion of the minor's participation in the Program by the School. The decisions made by the minor's Health Care Agent on my/our behalf shall have the same priority as my/our decisions would have over decisions by any other person, including a person acting pursuant to a durable power of attorney. The Health Care Agent shall be entitled to reimbursement by me/us or by my/our personal representative for expenses reasonably incurred by the said Health Care Agent acting in good faith hereunder. Photocopies of this Health Care Proxy shall have the same force and effect as the original. I/We understand that this delegation is voluntary and have carefully read and considered this delegation of authority before signing it. This health care proxy is intended by me/us to be valid in any jurisdiction in which it is presented. The various powers granted herein are separate and severable to the effect that the possible invalidity of any one or more of such powers shall not affect the validity of any other powers. I/We do authorize the School to share copies of this Form with its boards, commissions, committees, employees, officers, directors, servants, agents, and assigns. I/We do forever release, acquit discharge, and covenant to hold harmless the School and their affiliates and subsidiaries, boards, commissions, committees, employees, officers, directors, servants, agents, contractors, and assigns, whether past and present, or future, from and against any and all actions, rights of action, causes of action, charges and/or claims, in any way related to, arising from and/or growing out of, directly or indirectly, which I/we may now or

hereafter have as the parent(s)/guardians/legal representatives of said minor, as well as any actions, rights of action, causes of action, c harges, and/or claims which said minor has or hereafter may acquire, either before or after he/she reaches the age of majority, resulting f rom, relating to, or in any way to this Form. I/we, as parent(s)/guardian(s)/legal representative (s) of said minor, agree to indemnify and h old harmless the School, and any of their affiliates and subsidiaries, their boards, commissions, committees, employees, officers, director s, servants, agents, contractors, and assigns, whether past, present, or future, in the event that any action, charge, costs, and fees (inclu ding attorneys' fees) and/or claim, is brought against the foregoing, which is in any way related to, arising from and/or growing out of, dire ctly or indirectly to this Form.

C. **Medical Treatment.** The school may seek medical treatment for the Student and approve such treatment for any and all medical, surgical, optical, dental, and mental health conditions or injuries. Routine care not reasonably anticipated to have significant effects on th e Student or entail significant risk of present or future injury may be approved without prior authorization by the Parents. Emergency treat ment for conditions or injuries may be approved by the School without prior authorization when, in the opinion of the Sc hool, time does n ot permit such prior authorization by the Parents. If treatment decisions carry significant risks for the Student, in the judgment of the Scho ol, and time permits contact with the Parents before treatment is undertaken, the School will make reasonable efforts to contact the Pare nts for approval. In the event that the Parents cannot be reached within a reasonable time and the School determines that the treatment decision should be made without further delay, the School may approve such treatment. By this authorization, I indemnify, release, and h old the school harmless from any and all liability in providing care and treatment for my child, and further, I grant my permission regardin g the use of my student's personal medical information, including but not limited to, medical history, allergies, physical evaluations, emerg ency contact information, and immunization records.

D. **Authorization to Administer Immunizations.** I authorize the School or a School designated physician to administer my child's immunizations in the event that I have failed to provide proof of all immunizations required by the state of Maryland. I acknowledge that t he school is bound by law to ensure that all students meet the state requirements for immunizations and that my child will b e pulled out of school in the event that I have failed to provide proof of all state required immunizations for my child. I also acknowledge that I will be r esponsible to assume all costs associated with administering my child's immunizations.

E. **Church Attendance Policy.** I understand that my child will be attending a Bible believing church on a weekly basis, and that my child will be required to complete one Bible course each school year. I understand that students will be expected to participate in weekly chapel services and other religious instruction as deemed necessary or required by the school. Students are not required to make a profession o f faith or ascribe to any certain religious belief system.

F. **Registration Forms and Other School Documents.** The School may execute on behalf of the Parents the standard forms required of Students as part of the registration, enrollment, and class-assignment process. These forms include, but are not limited to student registr ation forms, consent to treatment forms, forms for permission for the Student to participate in off-campus events, honor code acknowled gement forms and athletic emergency information forms. In addition, the School may execute on behalf of the Parents all forms necessar y to select and approve elective classes in the curriculum for the Student, and the purchase of books and materials required for classes, the costs for these shall be borne according to the School standard policy.

G. **Athletics, Activities, and Field Trips.** Many athletic pursuits, activities, and field trips typically require the approval of a parent or guardian and may also involve the payment of fees on the Student's behalf above and beyond tuition, board, books, and supplies. The P arents authorize the School to approve such athletic and non-athletic activities and trips without prior authorization of Parents. This autho rization includes permission to transport the Student to locations in and out of State if the Student possesses the proper travel document s. Any travel out of the country, including travel to the Student's home country, shall require the prior approval of the Parents. The Parent s acknowledge that all activities involve some risk of injury, whether from activity itself or the transportation to and from the location of the activity. The Parents authorize the School to exercise its good faith judgment in permitting participation in activities, even where there is a minor risk of injury to the Student. Apart from the school-sponsored activities, the Student may request permission to go off campus or take leave of the Student's residential accommodations with other students and their families for events and activities that are not sponso red by the School. The Parents agree that the School and/or its authorized residential supervisor(s) may, at their discretion, grant or with hold permission for a Student to be off campus or remote from the Student's residence for such purposes.

H. **Individual Sport Permissions and Prohibitions.** I understand and accept that there are risks of serious injury and death in any sport, including the one(s) in which my child has chosen to participate. I hereby give permission for my child to participate in all sports accept: (By writing any sports below, you are refusing permission for your child to participate in the sport. For any other sports, your child will be a sked to sign up for the sport at another time.)

List of Prohibited Sports: _____

I. **Athletic Related Transportation Permission.** I give my permission for my child to travel with the school's athletic program to and from games and tournaments. As a Parent/Guardian, I hereby give my consent for the responsible leader to authorize necessary hospitalizati on or treatment, including injections, anesthesia, surgery, and medication, should an accident or other medical emergency occur during a trip or activity and the responsible leader is unable to reach me. As Parent/Guardian, I also agree to be responsible for all debts non covered by the school that are incurred by my child during the trip or activity, for all expenses not covered by insurance that ar e incurred as a result of any accident, illness, or medical emergency involving my child, and for all transportation costs to prematurely ret urn the student to school, should the student's continued participation jeopardize the safety or health of the other participant.

J. **Passenger Permission.** I hereby give permission for my child to attend on or off campus school organized or sponsored activities on a school-schedule (or any rescheduled) day and to be transported by school bus, private bus, public transportation, or private vehicle(s) as determined by the school. For myself and the named child, I hereby waive and release any claim against the school and its members, bo ard, employees, homestay and dormitory supervisors, volunteers, and agents for any injury or loss incurred by my child during such activ ities (save for any personal injury directly resulting from gross negligence on the part of the school) and against any expenses, loss, or da mages incurred as a consequence of any action or inappropriate inaction on the part of my child. I confirm that there are no medical or ot her circumstances that should be known to the chaperone(s) that have not been appropriately communicated to the school in writing. As Parent/Guardian, I give permission for my child to ride with an **authorized parent or faculty driver** for any school-sponsored events, inc luding, but not limited to, field trips and athletic events. As Parent/Guardian, I give permission for my child to ride wi th another **authorize d student driver** for any school-sponsored events, including, but not limited to, field trips and athletic events.

K. **Authorization for Third Party Grade and/or Transcript Review.** By signing below, I/we authorize the school to assign privileges for Sc hool employees, including but not limited to, host parents and sports coaches to review student grades, report cards, and transcripts

for the purpose of monitoring student school progress during their tenure with the school. Information garnered from this access and adequate progression throughout the school year, and aide the school to facilitate programs to meet the educational needs of the student.

L. Student Handbook Agreement. I understand The School's Student-Parent Handbook and acknowledge that these are the policies of The School. By signing this form, I acknowledge the Student-Parent Handbook as a binding contract, and I explicitly accept its provisions as a condition of enrollment at The School. I agree to uphold and comply with all school regulations and policies while my/our son/daughter is enrolled as a student at The School.

M. Authorization to Incur Expense. The Parents are aware that the exercise of the powers and authority granted herein may involve expenses to the Student and/or the Parents. The Parents approve the reasonable expenses associated with the activity, provided that those expenses do not exceed the amounts being charged to other School students for the same activity or event. Any activity or event for which the charge would exceed $250 will not be approved by the School for the Student without advance consent from the Parent. The School shall not be responsible for damages or losses incurred by the Student or the Parents caused by the failure of the Parents to respond within a reasonable time to a request for approval of participation in activities or trips.

N. Media Authorization. Throughout the year, the school may publish pictures and accounts of the activities and accomplishments of students in a variety of ways including, but not limited to, the internet and external publications, web sites, news releases and, at times, on television. Please be advised that through the course of conducting daily school business, your child's name and photo may appear in internal publications for distribution within the school community, such as yearbook or student publications. Your student may also appear in external publications in the School's media including, but not limited to, newsletters, brochures, websites, and online video and photo galleries. If your child participates in sports, his or her name and photo will invariably be used in local media coverage over which we have no control. Your child may be pictured in a large group photo, especially as a sports participant, in any of the above media. Also, please be aware that occasionally, media companies and individuals over whom we have no control take pictures and video of the school and our students. The school is not liable for the use or misuse of any pictures or video taken by another party. I give my permission to include my child's name, picture, and video in School media. By this authorization, I understand and agree to all terms and information listed above. I understand that the school is not liable for the use or misuse of any pictures or video taken by another party. My signature below shows my consent to the conditions of this agreement.

O. Release of Liability. The Parents understand that the School is not required to assume the responsibilities associated with this GRANT OF CUSTODIAL RESPONSIBILITY, AUTHORIZATION, AND UNITED POWER OF ATTORNEY, and may instead require the Parents to make every decision and execute every form and document associated with attendance at the School and the Program, as a precondition to the Student's enrollment and participation in the activities and events that occur in the Program. The parents understand that the willingness to exercise the authority granted herein is an accommodation to the Student and the Parents for which the School receives no additional consideration. In exchange for the willingness of the School to exercise the authority and powers granted herein the Parents release(s) the School, the Program, and those participating in the Program and their respective officers, trustees, directors, agents, employees and assigns from any and all liability and arising from the good faith exercise of the powers granted herein, even if later events prove the decisions made by the School to have been unwise when made.

P. Agreement to Reimburse Expenses and Charges. The Parents agree to maintain medical insurance for the Student. The Parents further agree to reimburse the School and/or its relevant assign(s) any and all charges approved by the School for any treatment not covered by medical insurance, as well as for the cost of any activity or trip in which the Student participates or fails to participate at a time when the cost cannot be reasonably avoided.

Q. Appointment of the School as the Attorney In Fact. The Parents appoint the School attorney in fact for the Parents for the sole purpose of carrying out the authority granted by the Parents to the School in this agreement. This power may be exercised by the School acting through its designated officers and employees.

R. Disputes. Disputes arising under this document and any action taken by the School, the Program, or a participating School shall be governed by the laws of the state and heard by as court of competent jurisdiction sitting in the county of the Students aforementioned the School-provided residence in the state.

S. Copies of Forms and Documents Executed Pursuant to this Authorization. When documents are executed by the School pursuant to this document, the School will endeavor to promptly send copies to the Parents. Unless otherwise specifically instructed, The School will send copies by email at the address provided by the Parents.

III. International Student Residential Agreement

A. Overview & Purpose of this Agreement The International Student Residential Agreement is designed to be a supplement to the school's rules and regulations, as published in the Student Handbook. This agreement outlines the rules and regulations that students are expected to abide by while living in a host-family or dormitory environment. These rules may be different from the rules a student would be asked to adhere to at home. They are established as an outline for students to make informed choices while living with their host-family or dorm parents and intended to maximize everyone's academic and social experience. All students who are enrolled at the School will be held to the expectations and policies outlined in this Residential Student Agreement. It is expected that all parents and students read this student agreement thoroughly and refer to it as a source of guidance and information. Students and parents are expected to have knowledge of the agreement's content.

B. Standards of Conduct. Students enrolled at the School are expected to treat other members of the school and their host-families with respect and courtesy. The following standards of conduct are examples and general expectations for all students at BCA:

- Honesty in academic endeavors and in all aspects of campus and home life.
- Commitment to a safe, clean, congenial, and productive learning environment.
- Respect for the feelings, beliefs, time, efforts, and physical well-being of others, and for their capacity for growth.
- Respect for the property and materials of the School, their dorm supervisors, and their host-families.
- Respect for the rules and regulations of the School, their dorm supervisors, and their host-families, and the laws of the State of Maryland, the State of Pennsylvania, and of the United States.

In addition, conduct occurs in the context of a community of scholars dedicated to personal and academic excellence. Joining this community obligates each member to observe the following principles: Mutual respect, Personal and academic integrity, Civil discourse, Responsible decision making

C. **Alcohol & Drug Policies.** The School, in cooperation with dorm supervisors and/or the host-family, will address any behavior relating to drugs and alcohol as outlined below:

1. **Possession of alcohol or illegal drugs.** Students who are found to possess, use, distribute, or transport alcohol or illicit drugs will be subject to suspension or expulsion. The School reserves the right to consider the presence of smoke or odors as a violation of thi s policy.
2. **Being under the influence of alcohol or other drugs.** Students who return home and are found to be under the influence of alcohol or illicit drugs will be subject to disciplinary action up to and including suspension or expulsion.
3. **Prescription Drugs.** Each student shall be responsible for self-administering all prescription medication. Students who are found to be sharing, selling, or trading prescription medications, or abusing or misusing their own prescription medications will be subject to s anctions ranging from Disciplinary Probation to suspension or expulsion.
4. **Drug Paraphernalia.** Drug paraphernalia, regardless of intended use, is not allowed.
5. **Alcohol Containers.** Empty alcohol bottles, cans, bottle tops, and other containers are not allowed, even for decorative purposes.
6. **Tobacco Products.** It is illegal for persons under the age of 18 to possess any tobacco product. Students attending the School, reg ardless of age, will not be permitted to use tobacco products whether on campus or at home. Students found to be in violation of the se policies will be subject to sanctions up to expulsion from the School.

C. **Safety Policies**

1. **Student Travel and Notification of Whereabouts.** Occasionally, students are allowed to travel outside of areas designated by the School and their dorm supervisors and/or respective host-family. Students must follow the guidelines outlined in the International Stu dent Travel Policy. Unless the host-family offers to pay for such trips, students are responsible for paying themselves. The same is tr ue for family trips. Leaving home without notifying your host-family is a direct violation of the International Student Residential Agree ment and may result in disciplinary action by the school.
2. **Automobiles.** International students at the School are not permitted to drive cars, even if you are able to do so at home. You will travel with your home-stay family to school, local events, shopping, and for other venues to meet most of your needs. Occasionally y ou may travel with other School students who have cars so long as you obtain permission from your dorm supervisors and/or host- p arents in advance.
3. **Emergency Situations.** In addition to establishing a set of general rules and guidelines, each dorm supervisor and/or host-family will go over emergency contact information with the student in the first week. They should provide a list of home, work and cell phone numbers where they can be reached at all times. In addition, each student should have an "Emergency Contact Information" card on file at the school office. It is recommended that students and host-families complete this card together in addition to reviewing the pr ocedure of what to do in emergency situations.
4. **Fire Safety.** Compliance with fire regulations is a necessity both on campus and at home. Smoke and heat detectors are only a part of fire safety. While your home should be as safe as it is possible to make them, each room may contain combustible personal items, which make the following rules necessary: Candles, camp stoves, lanterns, hurricane lamps, incense, or any other items with open fl ames are permitted only with permission from the host-family. Fireworks, explosives, volatile liquids, and fuel are not permitted. Fire alarms and extinguishers are critical for safety and must not be tampered with. Students who tamper with fire safety equipment will b e subject to: fines and disciplinary action up to and including suspension or expulsion, fines from the Fire Department, and may also be subject to criminal charges.

E. **Harassment Policy** The School and its dorm supervisors and host-families are committed to maintaining an environment where students are not subjected to bigotry and discrimination on the basis of sex, race, ethnicity, national origin, religion, disability, age, or other charact eristics as protected by applicable law. Such harassment is against program and school policy and may be illegal under state and federal laws and regulations. The School defines harassment as verbal or physical conduct which has the purpose or effect of creating an intimidat ing, hostile or offensive educational or living environment on the basis or because of a student's sex, race, ethnicity, national origin, religi on, disability, or age, or other characteristics as protected by applicable law, and which would create such an environment for a reasonab le person under the circumstances. Such harassment may include, for example, repeated slurs, taunts in the guise of a joke, disparaging remarks, or physically threatening or inappropriate conduct, when such is directed at a person or group of persons because of their sex, r ace, ethnicity, religion, physical ability or age. Retaliation against a student or host-family member for filing a complaint in good faith unde r this policy is strictly prohibited, and, if proven, would be considered a violation of this policy. This policy is intended to protect all School students and applies to both the students and host-family. Any person who feels that they have been harassed or retaliated against as de fined in this policy may file a formal grievance with the school administration.

F. **Modification to this Agreement.** The Residential Student Agreement is published by the School annually. The School reserves the right to add, modify or amend any part of this handbook between publication dates. The School will inform students, faculty and staff through v arious means when any changes to this handbook are made. These changes will supersede any previously published policies on t he sa me topic.

SIGNATURE SECTION

_____	_____
*Parent/Guardian Signature Date	*Parent/Guardian Signature Date
_____	_____
*Parent/Guardian Printed Name	*Parent/Guardian Printed Name

GLOBAL VISION CHRISTIAN SCHOOL
BROADFORDING

NEW STUDENT APPLICATION FOR ADMISSION

FINANCIAL COMPLIANCE PARENT CONSENT FORM

Chapter 1 교육발전 예치금과 약정 후원금

Article 1
교육 발전 예치금의 환불은 졸업 후 30일 이내에 이루어지며 그 외 자퇴 또는 퇴학 등 기타 사유에 의해 그만 둘 경우 행정 처리일을 기준으로 1년 후에 환불 절차가 진행됩니다

Article 2
교육 선교 기부금 또는 약정 후원금은 환불이 불가합니다.

Chapter 2 수업료, 입학금 및 기타 비용 납부와 환불

Article 3
입학금과 학생 관리 비용은 각 학기 시작 전에 납부해야 합니다.

Article 4
개학 후(또는 입학 후) 환불 진행되야 할 경우, 입학비를 이미 납부한 경우엔 환불이 불가하며 수업료는 환불 사유일까지 공제 후 환급 됩니다.

Article 5
학생 관리 비용은 기숙사 시설관리 및 행정, 생활지도와 식비를 말합니다.

학생 관리 비용의 납부는 학기별로 하는 것을 원칙으로 합니다.

학생 관리비의 환불은 아래 기준으로 환불 됩니다

- 학기 시작 후 30일 이내 : 60%(한국에 있는 캠퍼스로 다시 전학한다면 70%)
- 학기 시작 후 30일 경과 이후 : 0%

GLOBAL VISION CHRISTIAN SCHOOL
BROADFORDING

NEW STUDENT APPLICATION FOR ADMISSION
FINANCIAL COMPLIANCE PARENT CONSENT FORM

Arbitration Rules
You can limit the issuance of various certificates (grades, graduation, enrollment, etc.) and the residence of dormitories when the payment is in default.

I understand that I have read and understood the above financial statements and pledge that I will comply with all financial regulations revised in the future by official procedures.

Year: 20_____Month:_____Day: _____

Student Name: _____

Contact: _____

Name of person in charge: (Father Signature / Date):

_____

Name of person in charge: (Mother Signature / Date)

_____