

INTERNATIONAL STUDENT PROGRAM STUDENT PARTICIPATION AGREEMENT

Student: _

Family Name

Given Names

A. International Student Program Rules

For the health, welfare, and academic success of the student, the following rules are to be obeyed.

The student must:

- 1. Abide by the laws of Canada.
- 2. Not drink alcoholic beverages or use drugs or medications unless prescribed by a doctor.
- 3. Not drive any motor vehicle other than his/her own. Only students 19 years of age are permitted to own a car, with written permission from the Coordinator of International Student Program.
- 4. Obtain written permission from International Student Program staff for overnight trips outside of Terrace. Only students 19 years of age are exempt from this strict rule.
- 5. Abide by school rules, obey teachers, attend school daily unless ill, and maintain at least a 60% average in studies.
- 6. Show respect for the host family and abide by homestay rules.

Infractions of any of the above rules may result in dismissal from the International Student Program, immediate return to the home country at the expense of the student, and notification to Immigration Canada.

B. Refund Policy

- 1. The application processing fee is non-refundable.
- 2. All requests for refunds must be in writing.
- 3. A full refund of all fees except the Application Processing Fee (\$100) will be paid only if a Student Authorization is not approved by Immigration Canada. The student must submit to the school district a letter of rejection from the High Commission, Embassy, or Consul.
- 4. One-half (1/2) of the full tuition will be paid if the student withdraws prior to the end of the first month of his/her program. In the case of a program starting in September, this is October 1. In the case of a program starting in February, this is March 1.
- 5. No refund of tuition will be paid if the student is dismissed from the International Student Program due to violation of the above rules.
- 6. No refund of tuition will be paid if the student is unsuccessful in two homestays due to serious problematic behaviour on the part of the student.
- 7. Articles 4, 5, and 6 above will apply to the homestay placement fee.
- 8. The tuition deposit paid by a returning student against the tuition for the following school year is non-refundable.
- 9. A full refund of tuition will be paid minus a \$500 administration fee if the student's immigration status changes after the official Letter of Acceptance has been issued prior to September 30 of the year for which the tuition has been paid.
- 10. No refund of tuition will be paid if the student's immigration status changes after September 30 of the year for which the tuition has been paid.

C. Medical Authority and Release

We, as parent/guardians of the undersigned student, do hereby authorize the school district staff and the sponsoring homestay parents to consent to any X-ray examinations, anesthetic, 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 of 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 district to give specific consent to any and all such diagnoses, treatment or hospital care which the aforesaid mentioned physician or surgeon in the exercise of his/her best judgment may deem advisable.

D. General Release

We, the undersigned, do waive and release all claims against the school district for the injury, loss, damage, accident, delay or expense resulting from the applicant's participation in the International Student Program. We also release the school district 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 Student Program.

We understand that the school district 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 district may take such actions as it considers necessary, including securing medical treatment and transporting the applicant home at his or her own expense. We release the school district from all liability related to such actions. We understand that the applicant may be dismissed from the program and sent home at his or her own expense if he or she does not adhere to the school district rules, standards and instructions as set forth in the district and school policies and the International Student Program Participation Agreement. This agreement with the school district cannot be modified or interpreted except in writing by the International Student Program office.

I HAVE READ THE ABOVE AND AGREE TO FULFILL ALL MY OBLIGATIONS AS SET OUT IN THE ABOVE ISE PROGRAM RULES AND THE REFUND POLICY. I ALSO AGREE TO BOTH THE MEDICAL RELEASE AUTHORIZATION AND TO THE AGREEMENT AND RELEASE CLAUSE.

Name of Student

Student's Signature

Date

I/WE THE PARENTS/GUARDIANS OF THE STUDENT SIGNING ABOVE ('OUR CHILD') HAVE READ ALL THE ABOVE INCLUDING BOTH THE MEDICAL RELEASE AUTHORIZATION (CLAUSE "C") AND THE AGREEMENT AND RELEASE (CLAUSE "D") 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

[] Reference letter

[] Applicant's letter

Name of Parent/Guardian

Parent/Guardian's Signature

Date

NOTE TO APPLICANT

Please make sure that all required information is completed in full on this application. Please enclose the following with this application:

[] All certified transcripts and school reports

All certificates awarded to the applicant

[] Non-refundable application processing fee of \$100.00 Canadian

(sent by Electronic Bank Transfer)

I certify that the information on this form and attached records is complete, authentic and true. I understand that if this is not the case this student will be removed from the International Student Program.

Signature of Parent/Guardian

Return this completed form by email with all required documents and your application to:

Email: study@cmsd.bc.ca International Student Program - Coast Mountains Board of Education School District 82 <u>Attention</u>: Ms. Janet Meyer, Director of Instruction, School Support 3211 Kenney Street, Terrace, British Columbia, V8G 3E9, Canada