



ENROLMENTBOOK

LOOKING FORWARD

ENROLMENT FORM

Date : _____

Student's Name : _____

Student's current school : _____

Student's year level : _____

Student date of birth : _____

Name of parents / person responsible
1 : _____
2 : _____

Contact phone number (parents, driver, etc)
1 : _____
2 : _____

Email of parents
1 : _____
2 : _____

- How did you learn about ProEducation School?
- PROED SCHOOL
 - PRIVATE TUTORING ProEd Website
 - GROUP TUTORING Friend or family recommendation
 - AFTER SCHOOL ACTIVITY Print media (Bali Advertiser, Indonesia Expat, etc.)
 - Social Media
 - Internet/ Google search
 - Other:

Photo of
Student

Student Name : _____

STUDENT AND FAMILY INFORMATION

First Name : _____ Middle Name : _____ Family Name : _____

Sex Male Female

Date Of Birth : ____ / ____ / ____ (date/month/year)

Nationality : _____

Email Address : _____

Resides with Both parents Mother Father

Father/Guardian

Name : _____

Address : _____

Phone : (+) _____ Hand phone : _____

Language spoken : _____ Email Address : _____

Employer : _____

Mother/Guardian

Name : _____

Address : _____

Phone : (+) _____ Hand phone : _____

Language spoken : _____ Email Address : _____

Employer : _____

EMERGENCY CONTACT INFORMATION

Primary Contact : _____

Phone : _____ Hand phone : _____

Secondary Contact : _____

Phone : _____ Hand phone : _____

Local Doctor or Health Care Provider:

Phone : _____ Hand phone : _____

Note: Please notify the office for any changes information above.

Blood Group if known : _____

Allergies : _____ No Yes

Reaction : _____

Drug Allergies : _____ No Yes

Reaction : _____

Asthma : _____ No Yes

Does the student carry an asthma inhaler? No Yes

Is the student on regular medication? : _____

Name of the medication and frequency : _____

Does the student take any medications during school hours? No Yes

Please list the name of medication and frequency:

Does the student wear glasses or contact lenses? No Yes

Hearing aid? No Yes

List any health condition that the school should be aware of : _____

Explain any limits on physical activity : _____

Note: Please notify the office for any changes information above.

A student may not receive medication unless written permission is signed by a parent or guardian. In an emergency agreement with the teacher via verbal contact will be an alternative measure.

In the case of the student being ill parents and or guardians will be contacted immediately and asked to take the child home.

Signature of Parent : _____ Date : _____ / _____ / _____

PHOTO RELEASE FORM

We seek your cooperation in giving us the right to use your child's first name and photograph(s) in our promotion and publicity materials. A child's name and photograph might be expected to appear in:

- Print/Press Advertising
- The Pro Education website
- Printed materials e.g. brochures, flyers, calendars etc.
- Outdoor Advertising
- ProEd Newsletter

If you agree to our using your child's first name and photograph(s), you will be granting the Centre the ongoing right:

(1) to use and reproduce the photographs, either in part or whole, with other visual materials in our advertising campaign, for the purposes of illustration, promotion, advertising, and

(2) to reproduce, exhibit or screen the material at the Centre's discretion.

The Centre will take all care to protect the dignity and privacy of students portrayed in the photographs and, in signing this release, the parents and students acknowledge that the Centre is not liable for any perceived misuse of photographs.

If you agree to the use of your child's first name and photographs in our publicity materials, please complete and return this form below to the Learning Centre.

CONSENT FORM

Name of Student : _____

Year Enrolled on Admission : _____

Yes, you may use my child's photo and first name for Pro Education advertising

Name of Parent : _____

Signature of Parent : _____

Date : _____

PARENT QUESTIONNAIRE

Please take a few minutes to answer the questions below and then return the completed form to Pro Education. This questionnaire will help the teacher get to know your child better and to prepare tailored programs. Thank you!

1. Please list the names and ages of your child's brothers and sisters or other children in the home.

2. What is the primary language spoken in your home? Are there any other languages spoken? Does your child know more than one language?

3. With whom does your child live (i.e. mom, dad, mom and dad, grandmother, other)?

Does your child have consistent interaction with other adult/nanny/driver?

4. What time does your child typically go to bed?
Does he/she have a bedtime routine? I.e. parent reading time.

5. Please list any fears your child may have (dogs, being alone, etc).

6. What comforts your child when he/she is upset?

7. What are your child's interests and hobbies?
Does your child have any pets?

8. Is there anything else you would like to share about your child (daily routines, likes/dislikes)?

9. Has the child completed any formal assessment?

No Yes

If yes, please provide date and any available details of assessment.

10. What are your expectations for the Pro Education Program? What specific things would you like to see happen?

11. Please provide the school names and dates of where your child has previously been enrolled:

Date:	School:	Year level:

12. Please provide your child's current school information

Teacher's name	Email	Year level	School

13. Does your current school provide any differentiated learning support for your child? Please be as specific as possible.

14. How have you heard about our services?

15. Please share something special about your child.

Thank you for taking the time to fill out this questionnaire.

STUDENT TRAVEL POLICY

Students registered with Pro Education take part in external, off - site learning and activities. In the majority of cases Pro Education will provide the necessary transport and driver to take groups of students, accompanied by staff, to the various learning sites. Parents can allow students to use Pro Education transport throughout the duration of the course by signing the relevant form (below).

When Pro Education transport is not available, or when students are engaged in individual learning activities, the use of private hire vehicles may be an option for student travel. Pro Education will contact parents for their written consent before letting students use private hire vehicles. The full Travel and Expenses policy and forms can be found in the Pro Education Policy Booklet in the Pro Education office. Please contact a member of staff to request a copy of the policy.

Students who are traveling to and from Pro Education must travel with the appropriate measures in place to ensure their safety is maintained as much as possible. The following recommendations will be communicated to parents, students and guardians, when the centre has concerns these guidelines are not being upheld:

MOTORBIKE TRAVELING STUDENTS:

- Students who ride a motorbike should have a current valid license
- All patrons must wear a motor bike helmet when traveling on a motorbike to and from Pro Education.
- Students will be encouraged to ride safely and appropriately to and from the learning centre.

STUDENTS TRAVELING WITHOUT A PARENT OR GUARDIAN

- If your child travels independently to Pro Education an email confirming your awareness of this is necessary. If you do not inform Pro Education that your child has consent to travel independently you will be required to collect them.
- Students traveling with public transport are not the responsibility of Pro Education.

STUDENTS TRAVELING WITH ANOTHER PERSON

- Students traveling to and from Pro Education with a Nanny and or a Driver must be picked up from inside the building.
- The Driver and or Nanny must register with the learning centre and provide their contact details and RPTKA for future reference.
- The Driver and or Nanny is responsible for the child once they leave Pro Education.

PAYMENT FORM

The student's parents/carers must agree in writing to the payment conditions below, in order for their child to take part in learning at Pro Education. Further information about pricing and payment can be found in the Pro Education Policy Handbook.

I _____ on behalf of (child's name) _____ agree to the yearly payment plan.

I _____ on behalf of (child's name) _____ agree to the term (a individual aggrement) payment plan.

CREDIT CARD INFORMATION

Card Type: MasterCard VISA Discover AMEX
 Other _____

Cardholder Name (as show on card): _____

Card Number: _____

Expiration Date (mm/yy): _____

I acknowledge and agree to the below payment conditions and will not disrupt the below payment criteria.

Signature Parent /Carer 1 :	Signature Parent /Carer 2 :
Name of Parent /Carer 1 :	Name of Parent /Carer 2 :
Date :	Date :

Payment Conditions:

1. Families who pay the full yearly fee before the start of the lessons will be entitled to a discount.
2. A registration fee of 2,000,000rp needs to be paid to enroll the child. This fee will also need to be paid if there are currently no places available. It will act as a waiting list fee and guarantee the child's course placement on the next available course.
3. Students in serious breach of Pro Education Policies will face removal from the course without refund. A Policy Handbook can be found at our reception desk.
4. A Payment fee of IDR 50,000rp per working day will be applied to any overdue accounts.
5. A copy of transfer slip giving details of invoice number and student names should be sent to Pro Education Scholl Centre when an electronic transaction is made.
6. All fees must be paid prior to the student commencing their course and net of bank charges.
7. All payments are to be made to Pro Education by cash or bank transfer, Master Card and or Visa Card.
8. Only AMEX credit card payments will be subject to a 3% surcharge fee on top of the fees.
9. Our Policy states that all invoices need to be paid in advance for students to receive educational support unless otherwise discussed with the Director of Pro Education Indonesia.

ENROLMENT DOCUMENTS

Please attach a color copy of the following documents

- Copy of Parents Passports
- Copy of Student Passport
 - ↳ (cover page, photo page, vital information page, expiration date)
- Copy of school reports for the previous one year
- Copy of medical, psychological and/or educational reports if available

for Indonesian Nationals only

- Tick if you want your child to participate in the Indonesian National Exams.

JULY 2018

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AUGUST 2018

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SEPTEMBER 2018

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OCTOBER 2018

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NOVEMBER 2018

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DECEMBER 2018

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JANUARY 2019

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FEBRUARY 2019

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MARCH 2019

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APRIL 2019

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MAY 2019

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JUNE 2019

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TEACHER DAYS ONLY

23-24 JUL
15 OCT
14 JAN
8 APR
31 MAY
7 JUN
19 JUN

FIRST DAY OF TERM

25 JUL TERM 1 = 45 DAYS
16 OCT TERM 2 = 43 DAYS
15 JAN TERM 3 = 46 DAYS
9 APR TERM 4 = 44 DAYS
TOTAL 178 DAYS
SCHOOL DAYS

HOLIDAYS

2-20 JUL
1-12 OCT
17 DEC -11 JAN
8 MAR
25 MAR - 5 APR
20-28 JUN

INVOICE OUT

1 AUG 2018
1 NOV 2018
1 FEB 2019
2 MAY 2019

INVOICE DUE

23 AUG 2018
22 NOV 2018
22 FEB 2019
22 MAY 2019

NATIONAL HOLIDAYS

15-16 JUN - IDUL FITRI
17 AUG - INDEPENDENCE DAY
22 AUG - IDUL ADHA
11 SEP - MUHARRAM - ISLAMIC NEW YEAR
20 NOV - PROPHET MUHAMMAD BIRTHDAY
24-25 DEC - CHRISTMAS DAY
26 DEC - GALUNGAN

1 JAN - NEW YEARS DAY
5 FEB - CHINESE NEW YEAR
7 MAR - NYEPI
3 APR - ISRA' MI'RAJ
17 APR - GOOD FRIDAY
1 MAY - LABOUR DAY
19 MAY - VESAK DAY
30 MAY - ASCENSION DAY
1 JUN - PANCASILA DAY
5-6 JUN - IDUL FITRI

JULY 2019

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AUGUST 2019

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SEPTEMBER 2019

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OCTOBER 2019

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NOVEMBER 2019

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DECEMBER 2019

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MAY 2020

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JUNE 2020

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31

TEACHER DAYS ONLY

25-29 JUL 2019
14 OCT 2019
13-15 JAN 2020
13 APR 2020

FIRST DAY OF TERM

30 JUL TERM 1 = 44 DAYS
15 OCT TERM 2 = 44 DAYS
16 JAN TERM 3 = 47 DAYS
14 APR TERM 4 = 45 DAYS

HOLIDAYS

20 JUN - 29 JUL
30 SEP - 14 OCT
16 DEC - 15 JAN
30 MAR - 13 APR
22 - 30 JUN

INVOICE OUT

1 AUG 2019
1 NOV 2019
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24-25 MAY - IDUL FITRI
1 JUN - PANCASILA DAY
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SCHOOL *Plus*

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