

# TUTORING CENTER AT ROYCE APPLICATION FOR ENROLLMENT 2021 – 2022 School Year

Dear Parents,

Thank you for your interest in The Tutoring Center at Royce. The Tutoring Center is one of five programs offered by Royce Learning Center to help children and adults achieve their academic potential.

Tutoring services are offered for all grade levels; kindergarten through college and adult. We offer assistance in most academic subject areas, as well as study skills and standardized test preparation. We also offer online high school courses for credit. Students are matched with a tutor who is trained and experienced in the areas of need, which often include Learning Disabilities, Attention Deficit/Hyperactivity Disorder or other learning differences. In the initial sessions, students may be tested to find their academic level as well as to determine strengths and weaknesses.

Once your application has been completed and submitted, you will be contacted by the Program Coordinator to discuss creating your student's academic plan and schedule for tutoring.

Tutors can work with students on the Royce campus, at public libraries, or within private schools based on individual circumstances.

#### Fee Structure for The Tutoring Center at Royce

\$ 75 Registration Fee

\$ 60 per Hour for Tutoring

\$ 100 Testing Fee (when not included in Tutoring Contract)

If applicable, students in grades K-8 are tested in reading and math prior to tutoring to determine specific skill levels and areas of strengths and weaknesses. Parents will receive a report on the test results as well as regular progress reports. At the conclusion of tutoring, the student may be tested to determine skills acquired. Students in grades 9-12 are not required to undergo testing but may be tested upon request.

#### **Application Process**

- Completely fill out and submit application form to Royce Learning Center.
- The Program Coordinator will contact you to set up the schedule.
- A contract will be signed by the parents/guardians.
- Non-refundable \$75 Registration Fee is due to Royce Learning Center.
- Tutoring will begin after a signed contract and first month's fee are received by the Business Office.

Partial scholarships are often available and are based on demonstration of financial need. To be considered for scholarship assistance, please complete this form and return to Royce Learning Center.

A copy of Federal income Tax Form 1040\* MUST be submitted with the application.

Scholarships are based on need and current available funding and are not quaranteed.

\*This information will be used for this specific purpose only and will remain confidential.

If you have further questions, please contact me at (912) 354-4047 or sgreenberg@roycelc.org.

Sincerely,

Sally K. Greenberg, Program Coordinator

Sally Greenberg



### **APPLICATION FOR ENROLLMENT 2021 – 2022 School Year**

Date 20					
Student Name Last	First			 Middle	
Preferred Name	Dat	e of Birth	/	/	Age:
Ethnicity	<del></del>	Gender	□ Male	e	ıle
Address			Phone (	( )	
Street					
City	State	Zip		County	·
Current School			Present G	rade	
Principal			Teacher _		
Has your child attended Chatham Acad					
Please let us know how you heard abo					
Please let us know how you heard about	out us:				
Please let us know how you heard about FAMILY INFORMATION: Mother/Legal Guardian	out us:				
Please let us know how you heard about the second s	out us:	Father/Leg	al Guardia	n	
Please let us know how you heard about the second s	out us:	Father/Leg	al Guardia	n	
Please let us know how you heard about the second s	out us:	Father/Leg Address City/State/	al Guardia 	n	
Please let us know how you heard about the second s	out us:	Father/Leg Address City/State/Email	al Guardia Zip	n	
FAMILY INFORMATION:  Mother/Legal Guardian  Address  City/State/Zip  Email  Home Phone ( )	out us:	Father/Leg Address City/State/S Email Home Phore	al Guardia Zip ne ( )	n	
FAMILY INFORMATION:  Mother/Legal Guardian  Address  City/State/Zip  Email  Home Phone ( )  Cell Phone ( )	out us:	Father/Leg Address City/State/S Email Home Phore	al Guardia Zip ne ( )	n	
FAMILY INFORMATION:  Mother/Legal Guardian  Address  City/State/Zip  Email  Home Phone ( )  Cell Phone ( )  With Whom does the applicant reside?	out us:	Father/Leg Address City/State/S Email Home Phore	al Guardia Zip ne ( )	n	
FAMILY INFORMATION:  Mother/Legal Guardian  Address  City/State/Zip  Email  Home Phone ( )  Cell Phone ( )  With Whom does the applicant reside?	out us:	Father/Leg Address City/State/ Email Home Phor Cell Phone	al Guardia Zip ne ( ) ( )	n	
FAMILY INFORMATION:  Mother/Legal Guardian  Address  City/State/Zip  Email  Home Phone ( )  Cell Phone ( )  With Whom does the applicant reside?  EMERGENCY CONTACT:  Name	out us:	Father/Leg. Address City/State/: Email Home Phor Cell Phone	zal Guardia Zip ne ( ) ( )	n	
FAMILY INFORMATION:  Mother/Legal Guardian  Address  City/State/Zip  Email  Home Phone ( )  Cell Phone ( )  With Whom does the applicant reside?  EMERGENCY CONTACT:  Name  Relationship to Student	out us:	Father/Leg. Address City/State/: Email Home Phor Cell Phone	zal Guardia Zip ne ( ) ( )	n	
	out us:	Father/Leg Address City/State/ Email Home Phor Cell Phone	zal Guardia Zip ne ( ) ( )	n	

I am aware that this program is not licensed by the State of Georgia, and that the program carries liability insurance.

Royce Learning Center welcomes students without bias towards race, gender, religion or national origin.



#### **APPLICATION FOR ENROLLMENT 2021 – 2022 School Year**

Student Name:	
Has the student been tested or evaluated by a school	ol or private psychologist?:
If Yes, Who?:	When?:
Does the student have a documented Learning Disal	pility?
Does the student have ADD or AD/HD?	
If yes to either of the above, when was the diagnosis	s made?
Treatment:	
Other Disabilities or Learning Concerns?:	
	dividual Educational Plan (IEP) information tached to this application.  e answer the following:
Subjects requiring tutoring:	
How many sessions are you interested in receiving p	er week
☐ 1 Time per Week ☐ 2 Times per W	eek 🔲 3 Times per Week 🔲 4 Times per Week
Preferred Days:	
Preferred Times:	
Royce Le	arning Center Hours* to change due to Covid-19 mandates.
Monday - Thursday 8a - 7p	Last tutoring session held at 6pm
Friday 8a - 5p	Last tutoring session held at 4pm
Saturday 9a — 1p	Last tutoring session held at 12pm

NOTE: We make every attempt to meet the needs of individual students based on tutor availability, but cannot guarantee time requested.



## APPLICATION FOR FINANCIAL ASSISTANCE / SCHOLARSHIP

Partial scholarships are often available and are based on demonstration of financial need.

To be considered for scholarship assistance, please complete this form and return to Royce Learning Center.

A copy of Federal income Tax Form 1040\* MUST be submitted with the application.

Scholarships are based on need and current available funding and are not guaranteed.

\*This information will be used for this specific purpose only and will remain confidential.

Payer's Name		Relationship to Student			_
Payer's Employer					
Address	City		State	Zip	
Spouse's Name		Spouse's Employer			
Address	City	<del></del>	State	Zip	
*Annual Income Payer		Spouse			
*Additional Income	etirement, SSI, etc.)				
* Proof of income in the form of your must be attached. A W-2 alone is not	most recent Federal		monthly soc	ial services staten	nent
Dependents Living at Home:  Name		Date of Birth	/	/	
Name					
Name		Date of Birth	/	/	
Name		Date of Birth	/	/	
I certify that the above employment, in to contact the people/agencies above confidential file.	•		•	•	
Relationship to Student		Date/	20		
Name – Please Print Clearly		 Signature			



### AGREEMENT FOR THE RELEASE OF PROMOTIONAL MATERIAL

I hereby agree to allow the Tutoring Center at Royce and/or Ro taken of my child to use for promotional materials including bu website pages, social media, promotional videos, and newspap	t not limited to computer programs, calendars, brochures,
Student Name – Please Print Clearly	Signature of Student (if 18 years of age or older)
Parent / Legal Guardian – Please Print Clearly	Parent / Legal Guardian – Please Print Clearly
Date / 20	