



RICHMOND
JEWISH
DAY SCHOOL

בית הספר היהודי בריצמונד

New Student
Enrollment Application
2024-2025

New Student Application Checklist

- Non-refundable Registration Fee - \$300/\$500 per student (\$300 per student if registration completed by March 1, 2024; \$500 after March 1, 2024)
- New Student Application Form
- Original birth certificate (originals will be returned once copied) or notarized copy
- Status of Parent/Guardian Form. If a legal guardian, please attach a copy of the court order appointing you as the legal guardian
- Proof of status in Canada. Please submit one of the following for both parents and child:
 - Canadian passport or citizenship card or birth certificate
 - Permanent residence card or confirmation of permanent residence document and passport
 - Work permit and passport with parent's current (minimum one-year) full-time employment letter
 - Study permit and passport with parent's program admission letter and payment receipt
 - Refugee claimant document
 - Diplomatic card or passport
 - Status identification card
- Proof of address (e.g. utility bill, driver's license or service card)
- Enrollment Agreement
- Payment Schedule Agreement
- RJDS Use of Personal Information Consent Form
- Short Field Trip Permission Form
- Pre-authorized Debit Form accompanied by void cheque
- Teacher Recommendation Form for Students entering Grades 1-7
- Immunization records
- Parent Participation Form

Important Dates

March 1, 2024

The registration deadline to be eligible for the early-bird registration fee discount is March 1. Students registered on or before March 1 will have a non-refundable registration fee of \$300 per student.

April 1, 2024

Registration deadline is April 1, 2024. Applications received between **March 1 and April 1, 2024**, will be subject to the full registration fee of \$500 per student. The non-refundable registration fee is due by April 1, 2024. (Note: Only applications received by March 1, 2024 will be eligible for the early-bird registration fee discount.

April 30, 2024

Deadline for applications for tuition assistance. All supporting documentation must be submitted by this date.

March 1 to June 1, 2024

The Tuition Assessment Committee ("TAC") will evaluate completed FAST tuition assistance applications between March and June 2024. It is the responsibility of each family to ensure all supporting documentation is confidentially submitted to Janet Ragetli, Business Manager at jragetli@rjds.ca or in a **sealed envelope** for the attention of Tuition Assessment Committee (TAC) at RJDS. Tuition assessments will be sent out to all eligible families upon determination. All signed Tuition Fee Agreements are to be returned to Janet Ragetli **within 14 days after receipt**.

July 1, 2024

Tuition fee payments begin for the 2024-2025 school year.

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Richmond Jewish Day School is committed to the total academic, social, emotional, physical, and intellectual development of your child. The following information is important so that we may better understand your child and their needs.

FAMILY AND SOCIAL HISTORY

Please indicate your child’s previous education: Daycare Preschool

Name of Facility _____ Years Attended _____

Last Elementary School Attended: _____

Dates: _____ Grade(s): _____

List all **children** and members of your household (eldest to youngest)

	NAME	DATE OF BIRTH (mm/dd/yyyy)	GENDER	PRONOUN	RELATIONSHIP
1.					
2.					
3.					
4.					
5.					

GRANDPARENTS (#1 PARENT/GUARDIAN)

Names: _____

Address: _____

Postal Code: _____ Phone (____) _____ Email: _____

GRANDPARENTS (#2 PARENT/GUARDIAN)

Names: _____

Address: _____

Postal Code: _____ Phone (____) _____ Email: _____

Have the parents been separated during your child's life? Yes No

If yes, age of child at time _____ Length of separation _____

In how many different locations has your child resided? (*Please list*):

Have there been any major events in your family such as divorce, death, accidents, or illnesses, which may have affected the emotional well-being of your child? If so, please explain:

FAMILY BACKGROUND

#1 Parent/Guardian Religion: _____

#2 Parent/Guardian Religion: _____

Synagogue Affiliation (if any): _____

HISTORY

Is there any pertinent medical information about your child that would, in any way, limit or affect your child's ability to engage in school activities?

Is your child taking any medications? Does your child have a severe allergy? (*Please indicate*):



Is there any other information regarding your child's development and behaviour of which we should be aware? (E.g. unusual eating or sleeping routines, disciplinary problems, nervous habits, special skills or talents, artistic or athletic abilities)

If your child has had psychological, educational, or medical assessments completed, please list the assessments here and include photocopies of these documents.

Parent/Guardian Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____



Status of Parent/Guardian (Admission to Canada and Residency) Form A

Parent Name: _____

To be completed and signed by a parent or legal (court-appointed) guardian. (If legal guardian, attach copy of court order appointing you as legal guardian.)

Lawfully Admitted into Canada

1. I am (please select one):

- A Canadian citizen (If not born in Canada, please attach a photocopy of citizenship paper/card)
- A Permanent resident and/or landed immigrant (Please attach photocopy of landed immigrant status paper or permanent resident card)
- Lawfully admitted into Canada under the Immigration and Refugee Protection Act (Canada) with one of the following documents (please mark the appropriate box below and attach photocopy of document):
 - Admission as a refugee or refugee claimant
 - Valid student permit for two or more years (or issued for one year but anticipated to be renewed for one or more additional years)
 - Valid employment authorization (work permit) for two or more years (or issued for one year but anticipated to be renewed for one or more addition years)
- A person carrying out official duties under the authority of the Visiting Forces Act or as an accredited diplomatic agent, preclearance officer, consular officer, or official representative in Canada of a foreign government with a consular post in British Columbia.
- Other - Document description: (must be cleared with Citizenship and Immigration Canada)

Residency in British Columbia

2. I am a resident of British Columbia (please select one):

Yes Residency address:

No I am not a resident of British Columbia

Confirming Signatures:

3. Parent/Legal Guardian's name: _____

Parent/Legal Guardian's signature: _____

Date: _____

(If parents are deceased, use Form B, available from the school office)

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Enrollment Agreement

I. Enrollment Policy

I, the undersigned, am the parent(s) or guardian(s) of the child/children named above (each respectively, the "Student") and hereby enroll(s) the Student(s) for the 2024-2025 school year at Richmond Jewish Day School ("RJDS"). I understand that as a condition of the admission of the Student to RJDS I agree to abide by the terms and conditions of this Enrollment Agreement (the "Agreement").

I understand that the Non-refundable Registration deposit of \$500 per student (\$300 per student for early-bird registration) is required to be submitted with this Agreement for the application to RJDS to be considered complete.

II. Spirit of RJDS - Rules and Policies

RJDS is an independent school and a private Jewish institution. We foster a warm, stimulating environment in which students thrive in small-class settings where the mind, body and spirit are nurtured. The Rules and Policies of RJDS are contained in the Parent Handbook and are incorporated into this Enrollment Agreement by reference. I agree to support this positive environment and accept the Rules and Policies of RJDS for me and my child/children. I agree that my failure to do so, as determined by RJDS in its sole discretion, constitutes default under this Agreement. I understand that RJDS reserves the right to amend or terminate this Agreement if RJDS determines, in its sole discretion, that my child's needs or behaviours make such amendment or termination necessary in the best interest of either the Student or RJDS.

III. Payment of Tuition

I agree that, together with the other undersigned, I am jointly and severally responsible for all tuition payments and that any failure to pay tuition when due constitutes default of this Agreement. All tuition is due as per the payment schedule selected (see "Payment Schedule Agreement"). Interest of 1.5% per month (18% per year) will be added to accounts that are more than 30 days overdue. In the event of a default under this Agreement, RJDS shall be entitled to exercise all remedies available to it and the failure of RJDS to exercise a particular remedy shall not constitute a waiver of the right to do so.

In the event of a default under this Agreement, I agree to pay all the costs of RJDS associated with enforcing its rights under this Agreement, including, without limitation, collection agency fees, reasonable legal fees, arbitration costs, and any other costs associated with collecting any debt owed by me to RJDS, with or without suit. RJDS reserves the right to restrict re-enrollment of a Student whose accounts are not current.

IV. Withdrawal Policy and Withdrawal Schedule

I understand and agree that my obligation to pay tuition shall continue regardless of whether my child/children complete(s) the school year. If, after registering, my child/children is/are withdrawn for any reason, I understand and agree that our family is not entitled to a refund of any deposits, tuition fees already paid or additional fees paid, and that tuition will be immediately due and payable in accordance with the Withdrawal Schedule.

Notwithstanding the foregoing, the application of the Withdrawal Policy may be modified or waived in whole or in part, under exceptional circumstances, at the discretion of the Executive of the Board of Directors, upon written request from the family outlining in detail their reasons for requesting said modification or waiver. All such requests shall be kept confidential.



Withdrawal Schedule

Upon withdrawal, the amount of tuition owed will be determined based on the date of withdrawal and as a percentage of assessed tuition with a minimum due of \$500 per Student.

Withdrawal between	Percentage of Assessed Tuition Payable
March 1 to March 31, 2024	25% of Assessed Tuition Due
April 1 to June 30, 2024	50% of Assessed Tuition Due
After July 1, 2024	100% of Assessed Tuition Due

Upon withdrawal, failure to pay tuition in accordance with this Withdrawal Schedule constitutes a default under this Agreement, entitling RJDS to all remedies available at law and in equity.

V. Purposes for the Collection, Use and Disclosure of Personal Information by RJDS

I understand and agree that RJDS will collect, use, and disclose personal information of students, parents, and other family members of students:

- a) for all purposes necessary to deliver the education and support that meets the needs of each individual Student;
- b) to arrange and manage the volunteer hours agreed to by the family;
- c) for accounting and billing purposes associated with tuition and fee payments;
- d) for all RJDS administrative and management purposes that are reasonable and appropriate under the circumstances;
- e) to communicate with the family and facilitate the communication between families from time to time;
- f) to contact the family from time to time to inform them of fundraising initiatives, fundraising events, or donation opportunities;
- g) with express consent, for other fundraising, marketing and promotional purposes related to RJDS or to the broader Jewish community;
- h) and as otherwise permitted or required by law.

For detailed information about RJDS' privacy policies and practices please contact the Head of School.

I have read this Enrollment Agreement and agree to be bound by the terms and conditions herein.

Signature of Parent or Guardian

Print Name

Date

Signature of Parent or Guardian

Print Name

Date



Tuition and Other Fees 2024-2025

	1 Student	2 Students	3 Students	4 Students
Tuition Fees	\$13,800	\$24,500	\$32,000	\$37,600
Other Fees – Not eligible for Tuition Assistance (Building Fund, Security Fee, Student Supplies, Fieldtrips & Special Events)	\$400	\$650	\$850	\$1,050
Annual Total	\$14,200	\$25,150	\$32,850	\$38,650

Tuition Fees

For the 2024-2025 school year, families will have the option to pay Tuition Fees in full, in quarterly installments, or in 10 monthly installments.

Payment options available:

1. By pre-authorized debit in full due on July 1, 2024.
2. By pre-authorized debit in quarterly installments due on July 1 and October 1, 2024; on January 1 and April 1, 2025.
3. By pre-authorized debit over 10 months due on the first of each month, starting on July 1, 2024, and ending on April 1, 2025.



Tuition Assistance

Tuition Assistance may be available to eligible families. Families are required to apply for Tuition Assistance and provide supporting documentation annually. Applications for Tuition Assistance must be made through the online FAST website available through our website at rjds.ca. For the 2024-2025 school year, a minimum Tuition Fee of \$1,000 per student will be assessed.

You may at any time choose to make a request for a full reassessment using the online FAST Application available through our website.

Submit the supporting documentation to Janet Ragetli, Business Manager at jragetli@rjds.ca or in a sealed envelope marked: Tuition Assistance Committee (TAC), Richmond Jewish Day School, 8760 No 5 Rd, Richmond, BC V6Y 2V4.

Documentation that must be submitted by all applicants:

- 2022 T4s, as well as 2023 T4s if available
- 2022 CRA Notice of Assessment

Additional Documentation if applicable:

- 2022 Trusts - T1142
- 2022 Rental Property - T776
- T2125 Statement of Business or Professional Activities
- Business Financial Statements: Corporation – Most recent Financial Statements prepared by Accountant or Auditor.

Additional documentation may be requested.

Important Note:

Your Tuition Assistance application (via FAST) and all supporting documentation must be submitted by posted deadlines for a decision to be made.

The Tuition Assistance Committee will not assess an application that has not completed the following steps:

1. Provided all the required supporting documentation.
2. Fully completed the enrollment process (Forms and Contracts)
3. Paid a Non-refundable Registration Deposit.

If you have any questions, please contact Janet Ragetli, Business Manager at 604-275-3393 or jragetli@rjds.ca.



Non-refundable Registration Fee: \$500 per Student (\$300 per student with early-bird discount)

Due at time of registration. The Non-refundable Registration Fee for the 2024-2025 school year is \$500 per student. An early-bird discount of \$200 is offered to each student who registers by the March 1, 2024, early-bird registration deadline. The Non-refundable Registration Fee will be applied as payment towards the Tuition Fees due for the 2024-2025 school year.

Security Fobs: Refundable Deposit - \$20 each

Parents are expected to access the building with school-issued security fobs. If you have not been issued a fob, please contact the school office. Fobs are provided for a \$20.00 refundable deposit. Lost fobs may be replaced at cost of \$20 each.

School Uniforms

Parents are expected to purchase the mandated school uniforms for RJDS. More information is available on our website www.rjds.ca.

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Payment Schedule Agreement 2024-2025

A TUITION FEE AGREEMENT WILL BE ISSUED UPON ASSESSMENT

FAMILY NAME: _____

Student's Name #1 _____

Student's Name #3 _____

Student's Name #2 _____

Student's Name #4 _____

Please check option 1 or 2 below:

- 1. I/We have submitted the registration documents and deposits and am/are opting to pay full Tuition Fees.
OR
- 2. I/We have submitted the registration documents and deposits and am/are applying for Tuition Assistance. I/We will complete the online FAST application process by April 30, 2024.

Payment Options

Please select one of the options below to indicate your payment preference.

- By pre-authorized debit in full due on July 1, 2024.
- By pre-authorized debit in quarterly installments due on July 1 and October 1, 2024; on January 1 and April 1, 2025.
- By pre-authorized debit over 10 months due on the first of each month, starting on July 1, 2024, and ending on April 1, 2025.

Signature of Parent or Guardian

Print Name

Date

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RJDS Use of Personal Information Consent Form 2024-2025

Name of Student(s):

- 1) _____
- 2) _____
- 3) _____
- 4) _____

Names of Parents/Guardians:

A. Buzz Book

At the beginning of each year, a "Buzz Book" is compiled – a contact list by class (from Kindergarten to Grade 7) containing the name of each student and his/her parents, and the parents' email addresses. The Buzz Book may be periodically updated during the year. This information is not disclosed to any third party for commercial purposes, but may, from time to time, be disclosed to other Jewish institutions for non-commercial purposes at the discretion of the administration. Please check the box below that reflects your preference:

- Yes**, I consent on my behalf and on behalf of my spouse and children to the inclusion of our names and email addresses in class lists in the Buzz Book.
- No**, I DO NOT consent to have my name and email address, and those of my spouse and children, included in the Buzz Book.
- I consent to ONLY the following information being included in the Buzz Book:

B. Class photos, school photos, the year-end slide show, and school yearbook

Annually, RJDS takes a class photo and a school photo of the whole student body. In addition, each student is provided a PAC-sponsored yearbook at the end of the year. At our final assembly, a slide show is presented comprised of photos of the students taken during school activities throughout the year. Please indicate whether you consent to images of your child being used for these purposes:

- Yes**, I consent to the use of images of my child/children in the class photo, the school photo, the year-end slide show, and the yearbook.
- No**, I DO NOT consent to the use of images of my child/children in the class photo, the school photo, the year-end slide show, and the yearbook.

C. Publication, Broadcast and Website Postings of Photographs, Names, Video Images

From time to time, while at RJDS holiday events, field trips, school promotional or fundraising activities, or community events and activities, students and parents may be photographed or filmed by other parents or



grandparents, staff, media, or contractors retained by RJDS. RJDS may collect, use, and disclose images of the students for the purposes of:

- promoting the school and school events and activities within or outside the Jewish community;
- promoting and enhancing the reputation of RJDS and its students;
- developing and deepening ties with other Jewish institutions in our community;
- improving our website; and fundraising and marketing.

Photographs of the students may be published in RJDS brochures, pamphlets or other publications which may be distributed widely, and photographs and videos containing images of the children may be posted or broadcast on the web, or on television, or shown at public events involving RJDS.

- Yes**, I consent to the use, publication, broadcast, or website posting of images of my child/children for the purposes listed above.
- No**, I DO NOT consent to the use, publication, broadcast, or website posting of images of my child/children for the purposes listed above.

D. Electronic Communication

Check off one of the following statements to allow us to continue sending you email correspondence. This includes all emails from the office, administration, teachers, and newsletters.

- Yes, I/We wish to receive all email correspondence from RJDS**

Email address # 1 _____

Email address # 2 _____

- NO, I/We DO NOT wish to receive email correspondence from RJDS**

E. Other Activities

For your information, from time to time, photographs or videos may be taken of the students by other organizations when RJDS participates in activities outside of the school. For example, this includes RJDS student visits to Chabad Richmond and Beth Tikvah, participation in Festival Ha'Rikud, and sports tournaments. If you do not wish your child to be photographed while engaged in these types of activities, please inform to the school office. While RJDS cannot control how other organizations collect personal information, we will try, where practical, to communicate your preference to them.

Signature of Parent or Guardian

Print Name

Date

Signature of Parent or Guardian

Print Name

Date



Short Field Trip Permission Form 2024-2025

It is our policy that we notify parents when we plan special field trips. We may, however, from time to time, go on spontaneous short field trips (such as the park, library and short walks). We undertake these activities to provide a stimulating program for your child/children and wish to obtain your support and consent.

I give consent for my child/children: _____

to be taken on short field trips, walks, etc., supervised by a staff member of RJDS.

Signature of Parent or Guardian

Date

Release

I understand that I assume all risks and hazards incidental to the conduct of this activity, and hereby release, absolve, indemnify, and hold harmless RJDS of all claims or injuries arising therefrom.

Signature of Parent or Guardian

Date

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Pre-Authorized Debit Form

FAMILY NAME:

I authorize Richmond Jewish Day School to debit the bank account identified below for tuition payments totaling \$_____ as follows:

- Registration deposit in the sum of _____.
- Tuition fees paid in full on July 1, 2024
- Tuition fees paid quarterly on the first business day of July 2024, October 2024, January 2025, and April 2025.
- Tuition fees paid over 10 months on the first business day of each month from July 2024 to April 2025.

PAYOR INFORMATION

Name(s):

Signature:

Date:

Address/Contact Information:

FINANCIAL INFORMATION (Please attach a void cheque.)

Account Number:

Branch Transit Number (5 digits):

Financial Institution Number (3 digits):

Financial Institution Name:

Financial Institution Address

I may revoke my authorization at any time, subject to providing notice of 10 business days. To obtain a sample cancellation form, or for any more information on my right to cancel a PAD agreement, I may contact my financial institution or visit www.cdnpay.ca

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.

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Release Authorization

NOTE TO PARENTS/GUARDIANS:

Please sign and submit this form to your child’s present or last attended school. Transcript reports must be submitted to Richmond Jewish Day School, and it is the responsibility of the parents to ensure that they are received with their registration.

Dear School Administrator,

The student named below has applied for admission to Richmond Jewish Day School. I hereby authorize you to release my child’s records to Richmond Jewish Day School.

I also authorize the administration and teachers to provide information if contacted by Richmond Jewish Day School. **All information is treated confidentially.**

Student’s Name: _____ Date of Birth (MM/DD/YYYY) _____ / _____ / _____

Current Grade: _____ Applying for Grade: _____

Please return a copy of this release form to Richmond Jewish Day School with the following records.

- Teacher Recommendation Form for students entering grades 1-7
- All student progress reports and/or evaluation reports
- Transcript of grades and progress reports
- Standardized test scores
- Psychological evaluations (if applicable)
- Disciplinary records
- Attendance records

Parent(s)/Guardian(s) Signature: _____

Date: _____

Records to be sent by mail or email to:

Richmond Jewish Day School

8760 No. 5 Road, Richmond BC V6Y 2V4

info@rjds.ca

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Teacher Recommendation Form for Students entering Grades 1-7

DATE DUE: As soon as possible, but **no later than June 15, 2024.**

To the Parent/Guardian: Please ask your child's current teacher to complete this form and send it to info@rjds.ca.

Student's Name: _____ Current Grade: _____

Grade Entering: _____ Date of Birth (MM/DD/YYYY) _____ / _____ / _____

By submitting this evaluation form, you hereby release the evaluator and the evaluator's employer from any and all claims and liability that may arise from the providing obtaining or using the form and the substance of the information provided by the evaluator. All information provided on the attached evaluation form will be held in strict confidence and will not be shared with students, parents or guardians. This will remain confidential and not become part of the student's permanent academic record.

Parent(s)/Guardian(s) Signature: _____ Date: _____

To the Evaluator: Your appraisal of this student will be of invaluable assistance in giving us a complete, fair evaluation. We appreciate your cooperation. Your evaluation will be kept confidential.

How long and in what capacity have you known the student? _____

English/Language Arts	Excellent	Above Average	Average	Below Average	No Judgment
Reading Comprehension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression Composition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Written Expression: Grammar	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Math	Excellent	Above Average	Average	Below Average	No Judgment
Ability to grasp new concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Analytical ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Application of skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledge of basic skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Names of textbooks and publishers:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Skills	Excellent	Above Average	Average	Below Average	No Judgment
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creativity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critical/Abstract: Thinking Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Determination Effort	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intellectual Curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organizational Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Study Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Skills	Excellent	Above Average	Average	Below Average	No Judgment



Ability to work in a group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attention span	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Class participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completes assignments on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine motor skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Follows direction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Takes initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-advocacy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Social Skills & Personal Qualities Excellent Above Average Average Below Average No Judgment

Attitude towards school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Concern for others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer relations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reaction to criticism/setbacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-control	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sense of humor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spirit of cooperation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Warmth of personality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Areas in which the applicant has the greatest strengths:

Areas in which the applicant has the greatest needs:

Is this applicant a recipient of a special services program?

- Gifted Modified Curriculum Preferential Seating Extended Time Psycho-Ed Evaluation
 IEP LA Resource Center Educational Assistance Assistive technology

Do you have any reason to question the applicant's academic, personal or emotional integrity/maturity?

Yes No If yes, please explain: _____

What three words come to mind when you think of the student?

Please describe parental support/involvement:

Additional comments:

Thank you for taking the time to evaluate this applicant. May we contact you if we have questions?

Teacher's Name _____ Email _____

Parent Advisory Council & Parent Participation Program

We believe that an effective school is one in which parents and the community support the school. Research shows that children have a more positive outlook at school when their parents are actively involved. Parents are encouraged to participate in various school activities by sharing their skills, talents and time. We value all contributions which parents make as they enhance the educational experience for all of our children.

Parent Advisory Council & Parent Participation Program

The primary purposes of a Parent Advisory Council (PAC) are to:

- Provide a forum for consultation between the school and parents on matters of general concern to the school community
- Assist with and contribute to various school related activities
- Promote the development of positive school community relations

All parents of the school are members of the Parent Advisory Council - a volunteer-based committee of RJDS Parents. We encourage you to attend our meetings along with the School Administration and PAC Executive. PAC works in a variety of ways for the benefit of students, staff and the school community. We aim to communicate with parents about school events and programs; communicate with school staff on behalf of parents; provide opportunities for parent education; raise funds for school equipment, projects, and activities; and to organize social events to promote the development of a healthy school community.

Please contact the PAC President, at rjds.pac@gmail.com for more information about PAC and how you can become more actively involved in the RJDS community.

Membership dues are just \$36 per year per family and should be paid by e-transfer to rjds.pac@gmail.com by no later than Sept 1 each year.

PPP Hours & Tracking

RJDS uses an online tracking program, for parents to track their PPP hours. This system automates and simplifies the volunteer process. Each family will have their own unique password to login where they can record their hours. Please contact PAC to access your login information. Recording should be an ongoing process to ensure accountability for your hours. The recording of volunteer hours will be based on an honour system and will be monitored regularly to ensure accuracy.

See below for PPP hours required by your family:

- If a parent has a child(ren) in K-7: A total of 18 hours are required by the end of the school year (9 hours prior to the end of December and remaining 9 hours by the end of June)

- If a parent only has a younger child(ren) in the ELC: 12 hours are required by the family in total by the end of the June

Please Note: Pro-rated hours will be required for families who register their children at RJDS K-7 or ELC after December

If parents (or family members) are unable to complete the required hours, a PPP payment will be required. The school will automatically withdraw funds using the information provided on the Tuition PAD Agreement Form as per the schedule below.

Please check the appropriate boxes below:

I have at least one child at Richmond Jewish Day School and authorize the school to debit the bank account identified on the Tuition PAD Agreement Form for the amount of \$150 on the 1 day of January and July or on the first business day thereafter starting September 2024 and ending August 2025 **for incomplete PPP hours. If I have completed the required PPP hours, there will be no charges to my account.**

Please Note: A refund will be issued if the full 18-hour requirement (for parents of K-7 students) or 12-hour requirement (for ELC parents) is met by the end of June.

Parent (Payor) Name: _____

Signature: _____

Email: _____

I may revoke my authorization at any time, subject to providing notice of 10 business days. To obtain a sample cancellation form, or for any more information on my right to cancel a PAD agreement, I may contact my financial institution or visit www.cdnpay.ca. I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca