

False River Academy

"A School of Academic Excellence"

Tuition and Fee Schedule 2026-2027

Tuition Rates

3 Year Old Program	\$4,170.00	\$417.00/month
Pre-K/Kindergarten	\$4,170.00	\$417.00/month
1 st - 6 th Grade	\$4,890.00	\$489.00/month
7 th – 8 th Grade	\$5,100.00	\$510.00/month
9 th - 12 th Grade	\$6,280.00	\$628.00/month
Family Maximum	\$15,960.00	\$1,596.00/month

TUITION PAYMENT METHODS: If tuition is paid in full by July 1, 2026, you receive a 5% discount on tuition. Tuition can be paid in 10 monthly payments beginning July 1, 2026 through April 1, 2027.

ADDITIONAL FEES NOT INCLUDED IN TUITION

Stock (New Families K thru 12 th Grade) (Optional)	\$400.00 per family
Registration fee	\$200.00
Registration fee (After March 13 th)	\$300.00 (Current Families Only)
Registration fee (After May 1 st)	\$400.00 (Current Families Only)
Registration fee (After June 26 th)	\$500.00 (Current Families Only)
Student fee (due September 1, 2026)	\$250.00 per student
Activity fee (due September 1, 2026)	\$150.00 per student (grades 3-12)
Technology fee (due September 1, 2026)	\$300.00 per student
Maintenance fee (due September 1, 2026)	\$200.00 per family
Yearbook fee (due September 1, 2026)	\$55.00 per family
Service Hours (25 hours per family or pay \$500.00 fee)	

Welding Program - \$750.00 per semester (Enrollment Agreement included in Registration Paperwork)

False River Academy

CONTRACT for STUDENT ENROLLMENT

For the

2026-2027 School Year

By signing below, I/we understand and agree to the terms and conditions set forth in this agreement with Pointe Coupee Private School System, Inc., hereinafter referred to as "False River Academy" or "school," for enrollment of the below named child(ren), hereinafter referred to as "student," of which I/we am (are) the parent(s) or legal guardian(s).

Terms Defined:

"Parent" – or legal guardian; and that person or persons who claims the child or student(s) as a dependent(s) on their most recent income tax return; and who (one or both) is the school stockholder or account holder of record.

"Family" – one or more students who share a common parent; and who appear as a dependent(s) on the most recent income tax return(s) of said parent; and who are regularly domiciled at the same location.

Registration Conditions and Fees: **Parent(s) initials here: _____ **

(All fees are on an annual basis unless otherwise stated)

- Registration is required each year to assure placement of the student(s) for the next school year, subject to maximum enrollment levels which may vary by class.
- Registration is not permitted for any student on any account that is delinquent. Such registration will be allowed upon receipt of payment in full for the remainder of the current school year, and subject to other restrictions as provided herein.
- Registration is not complete until all registration fees are received and this enrollment contract is signed by all parties.
- Registration fee payments that are returned due to "non-sufficient funds (NSF)" or otherwise not received by the school shall result in immediate cancellation of the registration(s) associated with such non-payment.

Registration Fee: \$200.00 per student. Increases affect current families only, after March 13th, the registration fee will be \$300.00 per student. After May 1st, the registration fee will be \$400.00. After June 26th, the registration fee will be \$500.00.

Activity Fee: \$150.00 per student (3rd thru 12th Grade only) is due anytime after registration but no later than September 1st. This fee will allow all students entry into home sporting events and participation in all sports programs (replacing athletic fee per sport) (This does not include Jamboree, Play-off games or Tournaments.).

General Student Fee: \$250.00 per student (three year old program thru 12th grade) for instructional materials (workbooks, paper, etc.), web-based student subscriptions and School Resource Officer and is due anytime after registration but no later than September 1st.

Technology Fee: \$300.00 per student and is due anytime after registration but no later than September 1st.

Maintenance Fee: \$200.00 per family per year and is due anytime after registration but no later than September 1st.

Yearbook Fee: \$55.00 per family per year and is due anytime after registration but no later than September 1st.

Service Hours: Twenty-five (25) service hours are required per family per school year. If a family chooses not to participate, there will be a financial obligation of \$500.00.

Other Fees: various fees pertaining to certain grades, extracurricular activities, field trip fees, sports participation assessments by the school athletic department, student vehicle parking fee, specific fees pertaining to graduating seniors, and lunchroom or meal plan fees, if applicable, will be assessed during the course of the school year, which may or may not originate directly through the school business office, but unpaid amounts will accrue to the parent's account.

Annual Tuition Fees: **Parent(s) initials here: **

Shown below by respective grade, all tuition fees for the year are due and payable at the start of each school year under one of the following plans, except as otherwise provided herein. Place a check mark to indicate your choice of plans.

1. Payment of the total annual tuition amount in ten (10) equal monthly installments, the first of which is due and must be received by the school no later than July 1, 2026 and the remaining nine (9) payments due no later than the first day of each succeeding month such that the final installment is received in full no later than April 1, 2027. **No student will be allowed to attend school until the first payment is made.**
2. Payment of the total annual tuition, due and received by the school no later than July 1, 2026, made as a single lump sum payment of the amount due less five percent (5%). If the single lump sum payment is not received by the school (or is returned due to "NSF" or is otherwise not collectible) by July 1, 2026, then it shall be deemed that this option has been waived by the parent, who thereby agrees: (a.) to the monthly plan described above, in which case the monthly payments are due retroactive to July 1st and monthly late fees will be assessed as provided herein, or (b.) to forfeit the five percent (5%) discount and be subject to late fees as provided herein.

Tuition payments that are 45 calendar days delinquent will result in the student(s) ineligibility to take 9 week and semester exams. Those student(s) will be asked to stay at home during these exams. The school reserves the right to suspend student extracurricular activity participation including but not limited to sports and cheerleading.

Tuition for 2026-2027

(subject to a maximum of \$1,596.00 per month/\$15,960.00 in total annual tuition per family)

<u>Grade</u>	<u>Monthly Tuition</u>	<u>Annual Tuition</u>
Three year old program	\$417.00	\$4,170.00
Pre-K and Kindergarten	\$417.00	\$4,170.00
1 st thru 6 th grades	\$489.00	\$4,890.00
7 th and 8 th grades	\$510.00	\$5,100.00
9 th thru 12 th grades	\$628.00	\$6,280.00

Student(s) to be enrolled: Completed student data sheet for each student below ***must*** also be attached to this contract.

---- Please print legibly ----

Full Name:	Soc. Sec. #:	Grade Entering:	Annual Tuition: \$
Full Name:	Soc. Sec. #:	Grade Entering:	Annual Tuition: \$
Full Name:	Soc. Sec. #:	Grade Entering:	Annual Tuition: \$
Full Name:	Soc. Sec. #:	Grade Entering:	Annual Tuition: \$
(Attach an additional page, if necessary)			
Check here if amount exceeds family maximum of \$15,960.00: _____ TOTAL Annual Tuition: \$ _____			

Conditions: **Parent(s) initials here: _____ **

- Tuition fees and payments as described above are irrespective of the student(s) attendance record, school holidays, and planned or unplanned school closings regardless of cause.
- Tuition payments that are **60** or more **calendar** days delinquent will be cause for:
 - (a.) the school to give written notice to the parent(s) that if the status of their account is not made current within 15 days of receipt of said notice, the student(s) will be removed from enrollment and not allowed to attend school until the delinquent account is current, and at the school's sole discretion, immediate payment of all remaining amounts due under this contract are received, and
 - (b.) modifying the terms of the next year's enrollment contract with the parent to require all fees, including the total annual tuition, be paid in full at the time of registration for the upcoming year.
- **THE OBLIGATION TO PAY TUITION AND FEES UNDER THIS CONTRACT ARE NOT REDUCED OR ABSOLVED BY THE WITHDRAWAL OF THE STUDENT FROM ENROLLMENT FOR ANY REASON OR CAUSE, NOR BY REMOVAL OF THE STUDENT BY THE SCHOOL DUE TO DISCIPLINARY REASONS OR FOR NON-PAYMENT OF TUITION. ANY RELEASE OR MODIFICATION OF THIS CONTRACT WILL BE:**
 - (a.) IN ACCORDANCE WITH EXISTING FALSE RIVER ACADEMY BOARD OF DIRECTORS POLICY, AND
 - (b.) AT THE BOARD'S SOLE DISCRETION.

Non-payments and late payments: **Parent(s) initials here: _____ **

- For any account that is 30 or more days delinquent, the school, at its sole discretion, shall declare all remaining amounts due under this contract immediately due and payable.
- For acceptance of any payment toward the balance of any delinquent account, the school will require such payment be made by cashier's check, money order, or cash.
- Any account that is 90 or more days delinquent may be turned over to the school's attorney for collection.
- For any account that becomes delinquent, the parent(s) agrees to bear any and all costs of collection, including, but not limited to, reasonable attorney's fees and court costs, over and above all other sums then due.
- A late fee of \$25.00 will be assessed on a monthly basis to each account that is fifteen (15) or more days delinquent.
- A \$25.00 fee will be assessed for each payment (check, draft, or other transaction) that is returned due to "non-sufficient funds (NSF)" or is otherwise not collectible.
- Delinquent tuition payment(s) may subject accounts to additional stipulations as provided herein.
- The school reserves the right to refuse payment on behalf of any account if made by party(s) other than the parent(s) responsible for the account.
- Graduating seniors will not be allowed to participate in graduation ceremonies if their parent's account is not in good standing by April 30, 2027.

False River Academy Aftercare program: All matters regarding registration, fees, and conditions for the Aftercare program must be agreed to using a separate form available from the school office; and upon registration for the Aftercare program, said form shall become an addendum to this contract and shall be subject to all applicable provisions herein.

Other Conditions: **Parent(s) initials here: _____ **

The undersigned parent(s):

- Promise that they and the student(s) will comply with the rules and regulations as outlined in the current Parent /Student Handbook and as it may be modified from time to time, and further agree that these rules and regulations are hereby incorporated by reference into this contract as though enumerated herein. The Parent/Student Handbook is available from the school office or may be downloaded from the school website at: www.falsriveracademy.org
- Hereby grants express consent to the school, or any agent acting in its behalf, to secure and provide any emergency medical attention that may be necessary at the discretion of the school for the above named student(s) when there is insufficient time to contact the parent or when the undersigned cannot be contacted immediately by phone, and further agrees to accept complete financial responsibility for any and all medical expenses incurred on behalf of the student(s).

- Promise to immediately inform the school of any change in their: (a.) telephone and/or cell phone numbers, or other means of emergency contact, (b.) mailing address, physical address, and email address, etc., and (c.) child custody responsibilities or other arrangements that make it unclear which parent is responsible for the account.
- Hereby grants to the school permission and release, for media and promotional purposes, use of photographs and other images of the above listed student(s), whether intentional or incidental, in ordinary promotional materials, videos, internet website content, school publications, newspapers, etc.
- Agrees to accept and promptly respond to any mail received from the school on which they appear as addressee.
- Understands and agrees that no student will receive grades or have transcripts released unless their account is paid in full.

I/we, the undersigned parent(s), certify that I/we have read, understand, accept and agree to abide by all the terms and conditions of this contract; and I/we have placed my/our initials above in each place so designated.

***This agreement must be personally signed by BOTH parents if BOTH parents are living in the same household as the student(s); otherwise, the parent who is responsible for the fulfillment of this contract and whose name appears on Stock Certificate No. _____ must sign this contract.

Signature of Mother/Guardian

Signature of Father/Guardian

Date: _____

Date: _____

(Please print legibly:)

Full Legal Name: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

Physical address: _____

City: _____ State: _____ Zip: _____

Employer: _____

Home phone: _____

Work phone: _____

Cell phone: _____

Email address: _____

(Please print legibly:)

City: _____ State: _____ Zip: _____

City: _____ State: _____ Zip: _____

Accepted by: _____ Date: _____

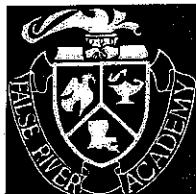
(for False River Academy)

Upon request, an executed copy of this contract will be sent to you.

Attachments:

Student Data Sheet(s): _____

FRA Aftercare document (if applicable): _____



FALSE RIVER ACADEMY

201 Major Parkway • New Roads, Louisiana 70760
High School (225) 638-3783 • Elementary (225) 638-8610
Fax (225) 638-8555 • Elementary Fax (225) 618-0044

FRA Welding Enrollment Agreement

Thank you for choosing FRA welding for your student(s). We are pleased to be able to offer quality welding instruction here on campus and reduce student travel. ALL FRA school rules and policies apply. If a student fails to comply with rules and safety procedures, immediate dismissal from the program, without refund, may result. The safety of everyone is our top priority.

FRA will provide each individual student their first box of welding rods at no additional cost. Students must provide their own Personal Protective Equipment (PPE) including boots, pants, gloves, welding hood, glasses, and shirt. Due to the cost of materials, each student will pay an upfront **\$750 per semester** fee prior to the student enrolling in the course.

Please complete the section below and return to FRA as soon as possible agreeing to the terms and conditions of FRA welding enrollment and participation. At this time, enrollment is limited to Sophomores, Juniors, and Seniors attending FRA. The number of seats in welding are limited and will be filled on a first come first serve basis. **Checks should be made payable to FRA WELDING.**

Student's name _____

Student's signature _____

Student's grade _____

Parent signature _____

FRA counselor signature _____

Sincerely,

Mary Horner, Principal

False River Academy Device Agreement

Print Student Name: _____ Grade: _____

PLEASE READ THE FALSE RIVER ACADEMY TECHNOLOGY POLICY FOR ISSUED DEVICES
AVAILABLE ON THE FRA WEBSITE BEFORE SIGNING AND SUBMITTING THIS FORM!

A device (laptop, iPad, tablet, etc), which is the property of False River Academy, is being issued for academic purposes only. Using this equipment for any other purpose may result in loss of privileges and disciplinary action. It must be returned before the end of the school year or if no longer attending FRA, including all parts issued for the assigned device.

**Part of the FRA technology fee covers only the labor fee for repairs.
You will be responsible for paying the cost of any parts for repairs.**

Laptop chargers are NOT COVERED by the technology fee.
There will be a charge for replacing a lost or damaged charger.

We, the undersigned False River Academy student and their guardian, agree to assume full responsibility for the proper care and use of the issued device as described in the FRA Technology Policy for Issued Devices.

Guardian Printed Name _____ Guardian Signature _____ Date _____

Student Printed Name _____ Student Signature _____ Date _____

Student Data**Grade Entering** _____

Student: (Last, First M.)		Social Security #: _____
Address: (P.O. Box, Street, City, State Zip Code)		
Date of Birth: (MM/DD/YY) _____ / _____ / _____	Place of Birth:	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race: <input type="checkbox"/> African American <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> White <input type="checkbox"/> Other	
Father's Name:		Home Phone (____) - _____
Occupation:		Cell Phone (____) - _____
Email:		Work Phone (____) - _____
Mother's Name:		Home Phone (____) - _____
Occupation:		Cell Phone (____) - _____
Email:		Work Phone (____) - _____
Guardian/Legal Custody:		Home Phone (____) - _____
Occupation:		Cell Phone (____) - _____
Email:		Work Phone (____) - _____
Student Lives With:		
<input type="checkbox"/> Father		<input type="checkbox"/> Stepfather
<input type="checkbox"/> Mother		<input type="checkbox"/> Stepmother
<input type="checkbox"/> Parents Divorced		<input type="checkbox"/> Parents Separated
Family Doctor:		
Person to Notify in Case of an Emergency: <i>(Every attempt will be made to contact parents first)</i>		
1.		Contact Number (____) - _____
2.		Contact Number (____) - _____
Last School Attended:		
Academic Achievement: GPA		
Disciplinary Problems, If Any, At Prior School:		
<input type="checkbox"/> Suspended <input type="checkbox"/> Expelled <input type="checkbox"/> Other:		
Remarks:		

Parent's Signature

Date

revised 3/09

False River Academy

"A School of Academic Excellence"

Application for Admission 2026-2027

Applicant

Last: _____ First: _____ Middle: _____

Preferred Name: _____ Current Age: _____ Date of Birth: _____

Current grade: _____ Applying for grade: _____ SS# _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Race: _____ Male _____ Female _____ U.S. citizen: Yes _____ No _____

Has applicant previously attended False River Academy: Yes _____ No _____

Father/Guardian

Name _____

Stepmother _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Work Phone _____

E-mail _____

Occupation _____

Employer/Firm name _____

Mother/Guardian

Name _____

Stepfather _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Work Phone _____

E-mail _____

Occupation _____

Employer/Firm name _____

Family Information

Please describe the family and custody arrangement if the applicant does not live with both parents in one household:

School Information

Current School: _____ School Phone: _____

School Address: _____
Street _____ City _____ State _____ Zip _____

Current grade: _____ Dates Attended: _____

Prior Schools:

Name	Address	Dates Attended
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Name	Address	Dates Attended
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Academic

Has applicant ever been retained? Yes No Expelled Yes No

Recommended to attend another school: Yes No

Please Comment if answered yes: _____

Does your student have a 504 or IEP?

If so, indicate which: 504 or IEP

Has applicant ever consulted with a professional for testing and/or guidance? Yes No

Speech/Language? Yes No ADD/ADHD? Yes No Psychological? Yes No

Has applicant ever been diagnosed with a learning difference? Yes No

If yes, please include a copy of the testing results.

Does the applicant regularly require medication?? Yes No If yes, please explain: _____

Describe any special circumstances that have affected the applicant's performance in school. _____

Has either parent attended False River Academy? Mom years _____ Dad years _____

Referred to FRA by: _____

How did you learn about FRA: _____

Other Siblings:

Name _____	Age _____	School _____	Grade _____
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Name _____	Age _____	School _____	Grade _____
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Name _____	Age _____	School _____	Grade _____
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Paternal Grandparent(s)

Name _____

Maternal Grandparent(s)

Name _____

Address _____

Address _____

City/State/Zip _____

City/State/Zip _____

Phone _____

Phone _____

FRA does not accept any students who have been expelled or would not be allowed to re-enroll at their previous school.

FRA has the right to dismiss any student due to omissions to this application. No student with any prior discipline or legal problems may be admitted to FRA without a 2/3 vote of the Board of Directors.

Notice of Nondiscriminatory Policy as to Students

False River Academy admits students of any race, color, nationality, or ethnic origin to all rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, nationality, or ethnic origin in administration of its educational policies, scholarship and loan programs, and athletic or other school-administered programs.

201 Major Parkway New Roads, LA 70760

High School (225) 638-3783 . Fax (225) 638-8555 . Elementary (225) 638-8610 . Fax (225) 618-0044

www.falseriveracademy.org

STUDENT'S NAME: _____ GRADE: _____

Last

First

HOMEROOM TEACHER: _____

ASSUMPTION OF RESPONSIBILITY FORM

In consideration for False River Academy allowing me to participate on a regular basis in field trips, sports, and extracurricular activities for the current school year, my parents and I assume the financial responsibility for all medical expenses should an accident occur. We understand that these field trips, sports and activities include certain risk of accidental injury. We acknowledge that we have medical aid/or hospital coverage; and that we will look to that coverage for reimbursement. We specifically agree not to assert a claim or file a lawsuit against FRA for personal injury damage should there be an accident or injury while participating in sports, extra-curricular activities, or field trips. If that circumstance occurs, we agree to confine or limit any attempt to recover personal injury damages against the insurance carrier who provide liability coverage to FRA, to ourselves or to third parties not affiliated with or connected to FRA, who might otherwise be responsible for the accidental injury.

Student's Signature

Parent's Signature

Date

Parent's Signature

BULLYING AND CYBERBULLYING

False River Academy is committed to maintaining a safe, orderly, civil, and positive learning environment so that no student feels threatened while in school or while participating in any school-related activities. Therefore, all actions of bullying or cyberbullying committed on campus, at school-sponsored activities, on the school bus, at school bus stops, and en-route to from home to the bus stop and from the bus stop home shall not be tolerated. Even if made in a joking manner, these statements or actions threatening other students, school personnel, or school property shall be unacceptable.

All students, teachers, and other school employees shall take responsible measures within the scope of their individual authority to prevent violations of this policy.

BULLYING AND CYBERBULLYING

Bullying shall mean any intentional gesture or written, verbal, or physical act that a reasonable person under the circumstances should know will have the effect of harming a student or damaging his/her property or placing a student in reasonable fear of harm to his/her life or person or damage to his/her property and is so severe, persistent, or pervasive that it creates an intimidating, threatening, or abusive educational environment for a student.

Cyberbullying shall mean harassment, intimidation, or bullying of a student on school property by another student using a computer, mobile phone, or other interactive or digital technology or harassment, intimidation or bullying of a student while off school property by another student using any such means when the action or actions are intended to have an effect on the student when the student is on school property.

REPORTING PROCEDURES

Any teacher, administrator, or other school personnel who receives notice that a student has or may have been the victim of bullying or cyberbullying shall be required to immediately report the alleged acts to an appropriate school district official.

**Please refer to LA Act 861, 2012.

User Agreement (to be signed by students)

I have read, understand, and will abide by the above Bullying and Cyberbullying Policy while on campus or while attending or participating in school-related events. I further understand that any violation of the regulations above is unethical and may constitute a criminal offense. Should I commit any violation, school disciplinary action may be taken, and/or appropriate legal action may be initiated.

User Name (please print)

User Signature

Date

Parent Agreement (to be signed by parents of all students under the age of eighteen)

As parent or guardian of [please print name of student] _____, I have read the Bullying and Cyberbullying Policy. I understand that if my child is in violation of the guidelines set forth above, he or she may face disciplinary action by the school, and/or appropriate legal action may be initiated.

Parent Name (please print)

Parent Signature

Date

SICKNESS/ILLNESS POLICY

We ask that you keep your child at home with any of the following symptoms and/or illnesses:

- Fever greater than 100°
- Yellowish/green runny nose
- Questionable rashes
- Coughing-continual, uncontrollable coughing
- Diarrhea or Vomiting
- Impetigo/staph infection
- Active chicken pox
- Measles or Mumps
- Conjunctivitis (pink eye)
- Students should stay home if they are ill, symptomatic or have tested positive for COVID-19.
- If a student tests positive for COVID-19, the parent is strongly encouraged to notify the school administration as soon as possible. The student will be required to present a doctor's note before returning to school to confirm the student is no longer infectious.

Parents agree to pick up their child immediately if he/she becomes ill during the school day.

Parents agree to send their child with his/her personal filled bottle of water (Label the bottle with your child's full name.)

If your child is being treated with antibiotics, he/she should be on the drug for at least 24 hours before coming to school.

If your child has a continually clear-runny nose or rash due to non-contagious allergies, please let us know. We realize that some symptoms hang on long after the child is no longer contagious. Remember, we want all of our children to remain healthy and happy.

Any child running fever must be free of fever for 24 hours before returning to school.

Any child having a contagious disease must remain at home until the contagious period is ended and upon presentation of a doctor's certificate verifying that the child may return to school.

If your child is sent home from school for any of the reasons listed above, he/she must be kept home for at least 24 hours before returning to school unless a doctor's note is received releasing the student to return to school.

Parent/Guardian Signature

Date

OFFICE USE ONLY: RETURNING STUDENT NEW ENROLLEE CHANGE OF ADDRESS REQUESTED

POINTE COUPEE PARISH SCHOOLS

Complete One Per Student

2026-2027 School Year

Pointe Coupee School Bus Service Request Form

Please NEATLY PRINT or Type All Information

Student's Name: _____

I, (parent/guardian's name) _____, DO () **DO NOT () want bus service for my child for the 2026-2027 school year. If you DO NOT want bus service for your child, please enter your name and your child's name on the lines above, sign on the signature line below*, and return this form to your child's school. If you DO WANT bus service for your child, please enter ALL requested information on this form and return to your child's school immediately. If a child does not need transportation in the morning or evening because of carpooling or other arrangements, please indicate so by writing "NO RIDE" in the morning or evening box.

Today's Date

Parent/Guardian Signature

Student's School for 2025-2026 _____ Student's Grade for 2025-2026 _____

Parent/Guardian's Name: _____

Physical Home Address (No P.O. Boxes): _____

Town/City, Zip Code: _____

ENTER PHYSICAL ADDRESS WHERE CHILD WILL BE PICKED UP IN THE MORNING (NO P.O. BOXES):



ENTER PHYSICAL ADDRESS WHERE CHILD WILL BE DROPPED OFF IN THE EVENING (NO P.O. BOXES):



If No Ride in AM or PM please place "No Ride" on appropriate line. No response means student will be dropped at same location as picked up.

Home Phone Number: _____

Work Phone Number of Mother: _____ Cell #: _____

Work Phone Number of Father: _____ Cell#: _____

Other Emergency Names and Phone Numbers: _____

If your child receives Special Education services, does your child's L.E.P. indicate special transportation services be provided? _____ Yes _____ No _____

Thanks in Advance for Your Assistance Please Allow 2-3 Business Days

As a safety factor, the school bus driver shall not leave his/her position behind the wheel until every pupil has been discharged from his/her bus when he/she reaches the school, and it shall be his/her duty to assume his/her position behind the wheel before the first pupil is loaded on the bus.

As recommended by the Department of Education, the following rules for riding the school buses must be observed:

- a. The driver is in full charge of the bus and the pupils.
- b. Pupils shall obey the driver cheerfully and promptly.
- c. Pupils shall obey and respect the orders of monitors or patrols on duty.
- d. Pupils shall occupy the space designated for them by the driver.
- e. Pupils shall be on time, the bus cannot wait for those who are not on time.

Pupils shall observe the following:

- NEVER STAND IN THE ROAD WHILE WAITING FOR THE BUS
- NEVER THROW WASTE PAPER OR OTHER RUBBISH ON THE FLOOR OF THE BUS. PUPILS SHALL HELP KEEP THE BUS FREE FROM LITTER, MUD FROM SHOES, ETC.
- PUPILS SHALL NOT MARK OR OTHERWISE DEFACE THE BUS
- PUPILS SHOULD NOT START FOR SCHOOL WHEN SICK OR WHEN ANY MEMBER OF THEIR FAMILY HAS A CONTAGIOUS DISEASE.
- AVOID UNNECESSARY CONVERSATION WITH THE DRIVER.
- ABSTAIN FROM THE USE OF TOBACCO AND PROFANE LANGUAGE.
- AT ALL TIMES KEEP ARMS AND HEAD INSIDE THE BUS WINDOWS.
- GET ON OR OFF THE BUS OR CHANGE SEATS IN THE BUS ONLY WHEN IT IS NOT IN MOTION.
- PUPILS ARE NOT TO LEAVE THE BUS WITHOUT DRIVER'S CONSENT EXCEPT AT HOME OR SCHOOL.
- RESPECT PERSONS WHOM THEY PASS ON THE ROUTES.
- REPORT TO THE DRIVER AT ONCE ANY DAMAGE TO THE BUS.
- WALK ON THE LEFT SIDE OF THE ROAD, FACING TRAFFIC.
- PUPILS WHO MUST CROSS THE ROAD AFTER EXITING FROM THE BUS, SHOULD PASS IN FRONT OF THE BUS AND NOT BEHIND IT. THE DRIVER SHOULD SEE THAT THE WAY IS CLEAR BEFORE THE CHILD IS PERMITTED TO CROSS THE ROAD.

SHOULD ANY PUPIL PERSIST IN VIOLATING ANY OF THESE REGULATIONS, IT SHALL BE THE DUTY OF THE DRIVER TO NOTIFY THE PRINCIPAL AND AFTER DUE WARNING HAS BEEN GIVEN TO THE PUPIL THE PRINCIPAL SHALL THEN FORBID SUCH DISOBEDIENT PUPIL THE PRIVILEGE OF RIDING THE BUS UNTIL PERMISSION TO RIDE AGAIN HAS BEEN GIVEN BY THE BOARD OF EDUCATION, WRITTEN NOTICE OF THE ACTION OF THE PRINCIPAL SHALL BE FURNISHED TO THE PARENT THROUGH THE BOARD OF EDUCATION, BUT SUCH NOTICE NEED NO PRECEDE ACTION BY THE PRINCIPAL. ANY COMPLAINTS OF DRIVERS, PUPILS OR PARENTS, NOT SPECIFIED IN THE ABOVE REGULATIONS, SHALL BE REPORTED PROMPTLY TO THE PRINCIPAL OR SUPERINTENDENT.

SHOULD THE CONDUCT OF A PUPIL ON THE BUS ENDANGER THE LIVES OR MORALS OF OTHER PEOPLE AND THE OFFENDING PUPIL FAILS TO CEASE SUCH CONDUCT WHEN REQUESTED BY THE BUS DRIVER TO DO SO, IT SHALL BE THE DUTY OF THE DRIVER TO PUT THE OFFENDER OFF OF THE BUS AND REPORT HIS/HER ACTION TO THE PRINCIPAL IMMEDIATELY. THIS SHOULD BE DONE ONLY IN EXTREME CASES AND AS A LAST RESORT TO PROTECT THE SAFETY OF OTHER PUPILS.

MEMORANDUM

TO: PARENTS OF CHILDREN RIDING SCHOOL BUSES
FROM: POINTE COUPEE PARISH SCHOOL BOARD TRANSPORTATION DEPARTMENT

RULES AND REGULATIONS

Dear Parents:

In order for you to understand the regulations covering the conduct of your child riding a Pointe Coupee Parish school bus, we are sending you a copy of the **REGULATIONS FOR PUPILS RIDING SCHOOL BUSES**. It is requested that you and your child read these regulations.

This will be used as a permanent record throughout your child's enrollment in the Pointe Coupee Parish Schools. Your cooperation with us will make it possible to provide a **SAFE AND EFFICIENT TRANSPORTATION PROGRAM**.

Please sign and return to the principal as soon as possible in order for your child to continue riding the school bus.

FOR STUDENTS:

I have read and understand the "**REGULATIONS FOR PUPILS RIDING SCHOOL BUSES**" and agree, as a passenger, to abide by said regulations.

STUDENTS SIGNATURE: _____
DATE: _____

FOR PARENT(S) OR GUARDIAN:

I have read and understand the "**REGULATIONS FOR PUPILS RIDING SCHOOL BUSES**" and agree to assume full responsibility for my child's conduct on said buses.

PARENTS SIGNATURE: _____
DATE: _____

As a safety factor, the school bus driver shall not leave his/her position behind the wheel until every pupil has been discharged from his/her bus when he reaches the school; and it shall be his/her duty to assume his/her position behind the wheel before the first pupil is loaded on his bus.

As recommended by the Department of Education, the following rules for riding the school buses must be observed:

- a. The driver is in full charge of the bus and the pupils.
- b. Pupils shall obey the driver cheerfully and promptly.
- c. Pupils shall obey and respect the orders of monitors or patrols on duty
- d. Pupils shall occupy the space designated for them by the driver
- e. Pupils shall be on time; the bus cannot wait for those who are not on time.

Pupils shall observe the following:

- NEVER STAND IN THE ROAD WHILE WAITING FOR THE BUS.
- NEVER THROW WASTE PAPER OR OTHER RUBBISH ON THE FLOOR OF THE BUS. PUPILS SHALL HELP KEEP THE BUS FREE FROM LITTER, MUD FROM SHOES, ETC.
- PUPILS SHALL NOT MARK OR OTHERWISE DEFACE THE BUS
- PUPILS SHOULD NOT START FOR SCHOOL WHEN SICK OR WHEN ANY MEMBER OF THEIR FAMILY HAS A CONTAGIOUS DISEASE.
- AVOID UNNECESSARY CONVERSATION WITH THE DRIVER
- ABSTAIN FROM USE OF TOBACCO AND PROFANE LANGUAGE.
- AT ALL TIMES KEEP ARMS AND HEAD INSIDE THE BUS WINDOWS.
- GET ON OR OFF THE BUS OR CHANGE SEATS IN THE BUS ONLY WHEN IT IS NOT IN MOTION.
- PUPILS ARE NOT TO LEAVE THE BUS WITHOUT DRIVER'S CONSENT EXCEPT AT HOME OR SCHOOL
- RESPECT PERSONS WHOM THEY PASS ON THE ROUTES
- REPORT TO THE DRIVER AT ONCE ANY DAMAGES TO THE BUS
- WALK ON THE LEFT SIDE OF THE ROAD, FACING TRAFFIC
- PUPILS, WHO MUST CROSS THE ROAD AFTER ALIGHTING FROM THE BUS, SHOULD PASS IN FRONT OF THE BUS AND NOT BEHIND IT. THE DRIVER SHOULD SEE THAT THE WAY IS CLEAR BEFORE THE CHILD IS PERMITTED TO CROSS THE ROAD.

SHOULD ANY PUPIL PERSIST IN VIOLATING ANY OF THESE REGULATIONS, IT SHALL BE THE DUTY OF THE DRIVER TO NOTIFY THE PRINCIPAL AND AFTER DUE WARNING HAS BEEN GIVEN TO THE PUPIL, THE PRINCIPAL SHALL THEN FORBID SUCH DISOBEDIENT PUPIL THE PRIVILEGE OF RIDING THE BUS UNTIL PERMISSION TO RIDE AGAIN HAS BEEN GIVEN BY THE BOARD OF EDUCATION. WRITTEN NOTICE OF THE ACTION OF THE PRINCIPAL SHALL BE FURNISHED TO THE PARENT THROUGH THE BOARD OF EDUCATION, BUT SUCH NOTICE NEED NOT PRECEDE ACTON BY THE PRINCIPAL.
ANY COMPLAINTS OF DRIVERS, PUPILS, OR PARENTS, NOT SPECIFIED IN THE ABOVE REGULATIONS, SHALL BE REPORTED PROMPTLY TO THE PRINCIPAL OR SUPERINTENDENT.
SHOULD THE CONDUCT OF A PUPIL ON THE BUS ENDANGER THE LIVES OR MORALS OF OTHER PEOPLE AND THE OFFENDING PUPIL FAILS TO CEASE SUCH CONDUCT WHEN REQUESTED BY THE BUS DRIVER TO DO SO, IT SHALL BE THE DUTY OF THE DRIVER TO PUT THE OFENDER OFF OF THE BUS AND REPORT HIS ACTION TO THE PRINCIPAL IMMEDIATELY. THIS SHOULD BE DONE ONLY IN EXTREME CASES AND AS A LAST RESORT TO PROTECT THE SAFETY OF OTHER PUPILS.

BUS RULES AND REGULATIONS

STUDENTS MUST BE ON TIME AT DESIGNATED BUS STOP

**STUDENTS MUST OBEY THE DRIVER PROMPTLY AND
CHEERFULLY**

**STUDENTS MUST OBEY AND RESPECT THE ORDERS FROM THE
BUS PATROL ON DUTY**

**STUDENTS SHOULD HELP TO KEEP BUS CLEAN AND SANITARY
ANYONE PURPOSELY DAMAGING, CUTTING, OR BREAKING
SCHOOL PROPERTY WILL BE DISCIPLINED AND BE REQUIED
TO PAY FOR DAMAGES**

**STUDENTS SHOULD AVOID CAUSING TROUBLE BY TEASING,
PULLING HAIR, SCUFFLING OR USING PROFANE, OBSCENE OR
ABUSIVE LANGUAGE.**

**ARMS AND HEAD MUST BE KEPT INSIDE THE BUS WINDOWS
AT ALL TIMES. NOTHING IS TO BE THROWN OUT OF WINDOWS**

**THERE SHOULD BE NO MOVING AROUND WHILE THE BUS IS IN
MOTION. IF ASSIGNED TO A SEAT BY THE DRIVER, THE
STUDENT MUST STAY IN THAT SEAT**

**LOUD TALKING WILL NOT BE TOLERATED. CONVERSTION IN
NORMAL TONES IS PERMISSIBLE**

**STUDENTS SHOULD OBTAIN PERMISSION FORM THE DRIVER
BEFORE OPENING WINDOWS WHEN IT IS COLD OR RAINING.**

**THE MIDDLE AISLE SHOULD NOT BE BLOCKED BY STUDENTS
OCCUPYING THE SEAT NEXT TO THE AISLE.**

**BUS DRIVERS ARE PERMITTED TO MAKE REASONABLE RULES
FOR THE SAFE AND PROPER OPERATION OF THEIR BUS**

**STUDENTS SHALL NOT BE ALLOWED OT EAT OR DRINK ON
THE BUS UNLESS APPROVED BY THE BUS DRIVER**

PARENTS – please fill out the form below and return it to your child's bus driver. If this form is not completed and returned to the driver, the student cannot continue riding the bus. Please return this form to your child's bus driver by _____

**POINTE COUPEE PARISH SCHOOL BOARD RULES
AND REGULATIONS FOR STUDENTS TRANSPORTED IN SCHOOL BUSES**

1. Students must be on time at designated stop.
2. Students must obey the driver promptly and cheerfully.
3. Students must obey and respect the orders from the bus driver.
4. Students should help to keep the bus clean and sanitary. Any one purposely damaging, cutting, or breaking school property will be disciplined and be required to pay for damages.
5. Students should avoid causing trouble by teasing, pulling hair, scuffling or using profane, obscene or abusive language.
6. Arms and head must be kept inside the bus windows at all times. Nothing is to be thrown out of windows.
7. There should be no moving around while the bus is in motion. If assigned to a seat by the driver, the student must stay in that seat.
8. Loud talking will not be tolerated. Conversation in normal tones is permissible
9. Students should obtain permission from the driver before opening windows when it is cold or raining.
10. The middle aisle should not be blocked by students occupying the seat next to the aisle.
11. No student will be allowed to ride another bus or be discharged at a different stop unless the student has written permission from his/her parents or guardians and the note is signed by the school principal.
12. Bus drivers are permitted to make reasonable rules for the safe and proper operation of their bus.
13. Students shall not be allowed to eat or drink on the bus unless approved in advance by the driver.
14. All school rules and regulations must be followed on the bus, same as in classrooms and on campus.
15. Violations on a bus can carry same consequences as on school campuses or in classrooms.

PLEASE READ CAREFULLY BEFORE PROVIDING INFORMATION BELOW:

STUDENT'S FULL NAME _____

PHYSICAL ADDRESS OF HOME _____

TELEPHONE NUMBER _____ **CELL #** _____

GRADE _____

BUS # _____ **DRIVER** _____

SIGNATURE OF STUDENT

SIGNATURE OF PARENT

202-2027
Checkout List

Student Name _____

Student Grade _____

The following list is authorized persons your child may be released to by
False River Academy.

Please include parents name and number.

Name	Phone/Cell	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____
8. _____	_____	_____
9. _____	_____	_____
10. _____	_____	_____

Your child **will not be released** to anyone not listed on this
authorization form.

No Exceptions.

Parent Signature _____

Date ____/____/____

False River Academy Aftercare Registration Form

Following are the guidelines under which the FRA Aftercare program operates. Please read carefully and fill out necessary information. Please sign and return this form no later than the last business day of July. **For all correspondence pertaining to aftercare, either mail to the school or send in an envelope marked attention "Aftercare".**

Hours of Operation: 2:45 pm to 5:30 pm. Late fees will be assessed after 5:35 pm.

AFTERCARE IS PROVIDED FOR STUDENTS FROM THE THREE YEAR OLD PROGRAM THROUGH 6TH GRADE. SPACE IN THIS PROGRAM IS LIMITED and THEREFORE REGISTRATION IS ON A FIRST COME FIRST SERVE BASIS.

Fees: A monthly fee schedule is provided by the Aftercare Director. Families with multiple children will receive a discount.

\$10.00 a day for unscheduled days – A student must be currently enrolled in the program.

Late Fees: **PICK UP AFTER 5:35 p.m. - A LATE FEE OF \$1 per MINUTE WILL BE ASSESSED UNTIL THE STUDENT IS PICKED UP WITH LATE FEE PAYMENT DUE AT TIME OF PICKUP.**

A late fee of \$25 will be assessed for payments made fifteen days after due date.

*****YOU ARE PAYING FOR YOUR CHILD/CHILDREN TO HAVE A PLACE IN THIS PROGRAM. NO CREDIT OR REFUNDS ARE GIVEN FOR ANY MISSED DAYS OR PLANNED ABSENCES.**

PAYMENT IS SEPARATE FROM TUITION. PLEASE MAKE CHECK PAYABLE TO FRA WITH A NOTATION IN THE MEMO SECTION "aftercare". If mailing in your payment, please put "Attention: Aftercare" on the envelope.

The parent applicant of registered aftercare child/children will receive all balance statements and is solely responsible for payments. (No two or more party payment arrangements will be acceptable)

When picking up your child/children, a sign out sheet is provided that MUST be signed before leaving. Only parents and those you have listed on the "Approved Pickup List" located on the reverse side of this document will be allowed to take your child/children.

If you have any questions you can call the school at 638-8610 and leave a message, for the Aftercare director

I have read, understand, and agree to abide by the above listed rules and regulations of the FRA Aftercare Program.

Parent (s) or Guardian Name (Print) _____

Signature: _____ Date: _____

Please fill out the following information on your child (ren) to register them for Aftercare. (Please print)

1. Student's Name: _____ Grade _____
Day (s) of the week registering for Aftercare: (please circle) M T W TH F
FOOD ALLERGIES, IF ANY: _____

2. Student's Name: _____ Grade _____
Day (s) of the week registering for Aftercare: (please circle) M T W TH F
FOOD ALLERGIES, IF ANY: _____

Address: _____

Phone Numbers:

Mother's home phone# _____, Work# _____, Cell# _____

Father's home phone# _____, Work# _____, Cell# _____

Emergency contact person (s) in the event neither parent can be reached:

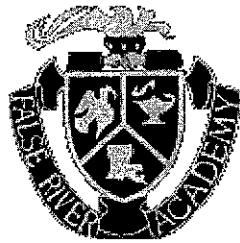
Name: _____, Home Phone# _____, Cell# _____

Name: _____, Home Phone# _____, Cell# _____

APPROVED SIGN-OUT LIST

Please list below anyone you approve to pick up your child/children in the event you are unable to do so. If a relative of the student, please specify relation. Only those on this list will be allowed to sign-out your child. If you know in advance that you are sending someone on this list to pickup your child, please send a note to school to the attention of aftercare letting us know. If at anytime there is a change in which you approve to pick up your child (ren) you must let the aftercare know immediately so that name can be removed from our list, or the new name added.

NAME _____



FALSE RIVER ACADEMY

201 Major Parkway · New Roads, Louisiana 70760
High School (225) 638-3783 · Elementary (225) 638-8610
Fax (225) 638-8555 · Elementary Fax (225) 618-0044

REQUEST OF CUMULATIVE RECORDS

To: _____

Date: _____

PLEASE SEND THE RECORDS OF THE FOLLOWING STUDENT(S)

Student(s) Name	Grade	Person Making Request for Records

PLEASE FORWARD THE FOLLOWING INFORMATION AS SOON AS POSSIBLE:

Cumulative Records	Speech Evaluations & IEP's
Birth Certificate	Attendance Records
Health/Immunization Records	Grades in Progress for Current Grading Period
Standardized Test Scores	Report Cards
Psychological Tests & Reports	Current Reading & Math Instructional Levels
Special Education Records/IEP's	Transcript
Social Security Card	Discipline Records

I hereby authorize the release of records:

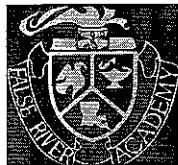
Signature of Parent or Guardian

Date

PLEASE RELEASE RECORDS TO:
FALSE RIVER ACADEMY

201 MAJOR PARKWAY
NEW ROADS, LA 70760

Mary L. Horner
Signature of Principal



Principal Recommendation Form

CONFIDENTIAL

Instructions to Parent: Please complete items 1-5 and then give this form to the principal or other authorized officer of your child's current school. Ask the principal to complete and return this form to the False River Academy office within two (2) weeks. Thank you.

1. Name of Applicant: _____ Applying to grade: _____
2. My son/daughter is applying to False River Academy. I would appreciate you completing this form and returning it directly to the school. I hereby authorize the release of my child's records and evaluation data to False River Academy.
3. Date: _____ Signature of Parent or Guardian: _____
4. Name of School: _____
5. Name of Principal: _____

Instructions to Principal: Simply indicate your ratings by a number in the right hand column. Use a question mark (?) where you have insufficient evidence. Thank you for your time and evaluation.

Category	5	4	3	2	1	Rating
Integrity	Exceptional, Upright	Noticeable, Upright	Upright, no cause to question	Weak or Questionable	Record of Dishonesty	
Conduct	Outstanding in Every respect	Generally Excellent	Good or Acceptable	Marginal	Poor or Reprehensible	
Leadership & Responsibility	Outstanding Positions	Commendable	Capable, Minor positions	No sign of Leadership or Involvement	Record of Irresponsibility	
Respect for Authority	Works very well with those in authority	Works well with those in Authority	Mild resistance to authority	Periodic Rebelliousness to authority	Rebelliousness to authority	
Parental Support	Exceptional	Quite Good	Average	Sometimes Unsupportive	Often unsupportive, Critical of school	
	Outstanding	Excellent	Good	Fair	Poor	

Summary

Does the candidate have any significant limitations (physical, social, emotional)? Please explain:

Is the candidate's record with you a true index of ability, or are there outside circumstances which have interfered with academic achievement? (Example: illness, excessive involvement of extracurricular activities, difficult home situation, etc.) If not a true index, please explain:

The student has been suspended _____ times.

Has the student been expelled and therefore not eligible to return next year? Yes No

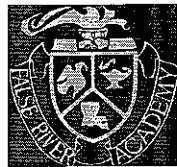
Length of time acquainted with applicant? _____

Signature of Principal: _____ Date: _____

Please mail or fax this form directly to:

False River Academy, 201 Major Parkway, New Roads, Louisiana 70760

High School (225) 638-3783 Fax (225) 638-8555 Elementary (225) 638-8610 Fax (225) 618-0044



Teacher Recommendation Form

CONFIDENTIAL

Instructions to Parent: Please complete items 1-5 then give this form to your child's teacher (s) of your child's current school. Ask the teacher (s) to complete and return this form to the False River Academy office within two (2) weeks. Thank you.

1. Name of Applicant: _____ Applying to grade: _____
2. My son/daughter is applying to False River Academy. I would appreciate you completing this form and returning it directly to the school. I hereby authorize the release of my child's records and evaluation data to False River Academy.
3. Date: _____ 3. Signature of Parent or Guardian: _____
4. Name of School: _____
5. Name of Teacher: _____
6. Content Area and Grade Taught: _____

Instructions to Teacher: Please take a moment and provide us with your candid estimate of the applicant. Your assistance will be invaluable and your comments will be held in strict confidence. Simply indicate your ratings by a number on the right hand column. Use a question mark (?) where you have insufficient evidence.

Category	5	4	3	2	1	Rating
Academic Potential	Exceptional	Above Average	Average	Lower Marginal Ability	Poor; Academic Risk	
Initiative & Drive	Outstanding & Resourceful	Well Above Average	Generally Strong	Occasionally Weak	Very Weak	
Leadership & Responsibility	Outstanding	Commendable	Capable	No Sign of Leadership or Involvement	Record of Irresponsibility	
Is Prepared for Class	Consistently	Usually	Marginally	Seldom	Never	
Parental Support	Exceptional	Quite Good	Average	Sometimes Unsupportive	Often Unsupportive & Critical of School	
Peer Relationships	Outstanding & Respected	Excellent	Accepted but Not Sought Out	Some Difficulty Cultivating	Poor & Unskilled Interpersonally	
Personal Qualities	Superior	Great Strengths	Strengths Outweigh Weaknesses	Somewhat Immature for Age	Very Immature for Age	

Signature of Teacher: _____ Date: _____

Please mail or fax this form directly to:

False River Academy, 201 Major Parkway, New Roads, Louisiana 70760
High School (225) 638-3783 Fax (225) 638-8555 Elementary (225) 638-8610 Fax (225) 618-0044