

International Visitation Program

Cumberland Christian Academy's International Visitation Program allows students in grades 4 -11 to visit our school and attend classes. Students are placed in a traditional type classroom and treated as enrolled full time students. It is the students' responsibility to obey the rules and regulations by which the school is operated, and to support the Christian principles for which it stands. Unacceptable conduct may result in immediate return to the student's home country.

Admission Procedure

Contact our registrar, [Jan Cooper](#), to schedule an interview and obtain an application form. She will collect the completed application form, \$175 non-refundable application/matriculation fee, and other documents needed.

Required Documents

- A copy of the student passport, immunization records, and proof of medical insurance must be submitted with the student application. These documents must be translated to English.

Tuition, Fees and Other Expenses

- Visitation Program Application registration/matriculation fee - \$175 (non-refundable).
- 2011-2012 Tuition – \$850 (up to 8 weeks) \$1,300 (up to 12 weeks)
- Host family fees are paid directly to the host family.
- Lunch items and snacks may be purchased from the school.
- Field trip expense if applicable.

Additional Requirements

- Visitation stay is not to exceed a two-month period.
- Khaki pants with a blue or red colored polo type shirt is required. No writing or logos are allowed on school attire. If the student would like to purchase CCA uniform shirts, they may order them through the link on the school website. Students must comply with International Visitation dress code policy.

I, the undersigned, understand and agree to the above conditions:

Signature of Parent/Legal Guardian

Date

Cumberland Christian Academy

2356 Clay Road
Austell, Georgia 30106
770.819.6443 • Fax: 678.945.0224
email: J.Cooper@Cumberlandchristian.org
www.Cumberlandchristian.org

| OFFICE USE ONLY | | |
|-----------------|------------|-------|
| Date Received: | Amount: \$ | |
| Clk# | Cash | Other |

INTERNATIONAL VISITATION PROGRAM 2010-2011 VISITOR APPLICATION

Child (Visitor)

| | | |
|--------------------------|-------------------------------|-----------------|
| _____ | _____ | _____ |
| Child's Full Name | Grade | Birthday |
| _____ | _____ | _____ |
| Street Address | City | Zip Code |
| _____ | _____ | |
| Home Telephone | American Name (If any) | |

Parent/Legal Guardian Information

| | |
|----------------------------------|-----------------------|
| 1. _____ | _____ |
| Father's Full Name | Work Phone # |
| _____ | _____ |
| Email | Cell Phone # |
| 2. _____ | _____ |
| Mother's Full Name | Work Phone # |
| _____ | _____ |
| Email | Cell Phone # |
| 3. _____ | _____ |
| Guardian/Host Family Name | Home Phone # |
| _____ | _____ |
| Email | Cell Phone # |
| _____ | _____ |
| Address | City/State/Zip |

Visit Information

How long will your child be visiting our school? (two month limit)

| | |
|-------------------|-----------------|
| _____ | _____ |
| Start Date | End Date |