



Enrollment Procedure

1) Interview & Application

- Make an appointment to attend an information session.
- Complete the Application for Admission.
- Submit last year's report cards, standardized test scores, and IEP/504 Plan (if applicable) from your child's previous school.
- Parents and students must read and sign the Honor Code.
- All students are given a 30-day trial period. This trial period is to determine whether the student's conduct, academic abilities, and participation meets WCA standards.

2) Financial Obligation

- Grades K-2nd Tuition: \$9,775 / year or \$977.50 / month
- Grades 3rd-5th Tuition: \$10,775 / year or \$1,077.50 / month
- Grades 6th-8th Tuition: \$11,775 / year or \$1,177.50 / month
- Grades 9th-12th Tuition: \$12,775 / year or \$1,277.50 / month
- Application Fee: \$250
- Testing Fee: \$100
- Teaching Materials Fee: \$650
- Annual Student Supplies Fee: \$175
- Annual tuition can be paid in 10 monthly installments, payable on the first of the month, August through May.
- In cases of late enrollment, tuition is due on the day your child starts school.
- Teaching Materials and Testing Fees may be broken down into two payments. The first installment is due the day your child starts school.
- Uniforms are mandatory. Information on what and where to purchase uniforms is available on our website.
- All payments are non-refundable.

3) Registration Paperwork: Each applicant must submit the following documents. Photocopies are acceptable.

- Florida Certification of Immunization (form DH 680)
- For students new to FL schools: School Entry Health Exam (form DH 3040)
- Annual Physical Exam (7th grade only)
- Copy of Birth Certificate and current health insurance card
- Parent driver's license (if parent will be driving students on field trips)



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12794 Forest Hill Blvd #14B | Wellington FL 33414 | info@gowca.org | 561-784-1776

Tuition Policy Review Agreement

Tuition

I agree to pay the annual tuition at Wellington Collegiate Academy in full, in accordance with the agreed-upon terms and conditions of enrollment, as outlined in the tuition invoice. Tuition may be paid in 10 monthly installments, due on the first of each month. The academic school year runs from August through May.

Registration Fee

I agree to pay the non-refundable annual enrollment and re-enrollment fee as stipulated for the current academic school year.

Tuition and Fees (Non-Refundable Statement)

I agree to pay the annual tuition at Wellington Collegiate Academy in full, as per the terms of enrollment and the tuition invoice. Tuition may be paid in **10 monthly installments, due on the first of each month**. The academic school year runs from August through May.

The following fees are also required and are non-refundable:

- **Teaching Material – \$650**
- **Annual Iowa and Entrance Testing – \$100**
- **Annual Student Supply Fee – \$175**

Fees must be paid by check, money order, Zelle (yaa.wca@gmail.com) or credit card and are due at the time of enrollment or before the academic year begins.

Late Fees

A late fee of \$25 will be charged for any tuition payment received after the 5th of the month. To avoid late fees, it is recommended to enroll in automatic ACH payments through FACTS.

Tuition Policy Agreement

By signing below, I acknowledge that I have read, understand, and agree to Wellington Collegiate Academy's Tuition Policy as stated above and in our School Handbook

Parent or Guardian Name (Print)

Parent or Guardian Name (Signature)

Date



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Application For Admission

Today's Date: _____

Anticipated First Day of Attendance: _____

Student Information

Student's Name:

Last Name

First Name

Middle

Date of Birth

Grade for which this student is applying

Gender: ☐ Male

☐ Female

Student phone (optional) _____

Student Email (optional) _____

Permanent Home Address:

City

State

Zip Code

Previous School Attended:

Grades Attended _____ Attendance _____

Dates _____

Previous School Attended:

Grades Attended _____ Attendance _____

Dates _____

PARENT/GUARDIAN INFORMATION:*Parent/Guardian #1*

_____	_____	_____
Last Name	First Name	Relationship to the Student

Permanent Home Address (if different from student)		

_____	_____	_____
City	State	Zip Code

_____	_____	_____
Daytime Phone #	Cell Phone #	E-mail Address

PARENT/GUARDIAN INFORMATION:*Parent/Guardian #2*

_____	_____	_____
Last Name	First Name	Relationship to the Student

Permanent Home Address (if different from student)		

_____	_____	_____
City	State	Zip Code

_____	_____	_____
Daytime Phone #	Cell Phone #	E-mail Address

ADDITIONAL INFORMATION: (Please attach additional pages if necessary)

1) List any honors, recognitions and/or extra-curricular activities. (Attach additional sheet if necessary.)

2) Please describe your educational goals for your child.

3) Please discuss any serious behavioral issues or concerns related to your child's previous educational experiences.

4) Has this student ever been suspended, expelled, or asked to withdraw from another school?

☐ No ☐ Yes

If Yes, give the name of the school and details:

5) Does this student have an IEP? ☐ No ☐ Yes

If so, please attach a copy.

6) Has this student ever repeated or been held back in any grade? ☐ No ☐ Yes

If so, which grade? _____

Please explain:

7) Has this student ever skipped a grade? ☐ No ☐ Yes

If so, which grade? _____

Please explain:



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Medical Information

Student Name:

Does your child have any diagnosed allergies? ☐ No ☐ Yes

If so, please explain.

Is your child taking medication that needs to be administered during school hours? ☐ No ☐ Yes

If so, please list and complete a Medication Dispensing Authorization.

Are there any other medications of which we should be aware? ☐ No ☐ Yes

If so, please explain.

Does your child have any special physical, emotional or behavioral conditions which could interrupt his/her

attendance, classroom participation or completion of homework? ☐ No ☐ Yes

If so, please explain in detail.



Student Honor Code Agreement

The purpose of this Honor Code is to communicate the meaning and importance of academic integrity to all students of Wellington Collegiate Academy and to articulate and support the interest of the school in maintaining the highest standards of conduct in student learning. Wellington Collegiate Academy embodies a spirit of mutual trust and intellectual honesty that is central to the very nature of learning, and represents the highest possible expression of shared values among the students and staff of the school.

All students and parents must agree to and abide by this honor code in order to attend and remain at the school.

As a student at WCA, I pledge to adhere to the following guidelines:

1. My classmates are my brothers and sisters. I will treat them with civility, kindness and respect.
2. My teachers serve with love. I will show them my gratitude by following their directions, including not talking while they are teaching.
3. I am a child of God. My language will show respect for Him and those around me.
4. I will work hard without complaining.
5. I will help my school succeed.
6. I will be honest in all of my actions.
7. I will adhere to the school dress code.
8. I will turn my homework in on time and study for my tests.

Student Signature _____

Parent Signature _____

Date: _____



Student Dress Code Agreement

At WCA we embrace a comfortable school uniform that gives us a feeling of unity and supports our daily outdoor breaks, creative art classes and field trips. We encourage all students to arrive in the mornings well-groomed and ready to learn.

As a student at WCA, I pledge to adhere to the following guidelines:

Daily Uniform: Tuesday - Friday

- **Polo Shirt:** Navy Blue or White with school logo.
- **Pants:** Khaki or Navy Blue.
- **Shorts or Skirt:** Khaki or Navy Blue. Must be at least top of knee length.

Spirit Day Uniform: Friday (optional)

- **WCA spirit tee shirt:** Navy. Worn with daily uniform bottoms.
- Available for purchase in the school front office.

Semi-Formal Uniform: Monday

- **Dress Shirt:** White short sleeve.
- **Pants:** Khaki or Navy Blue.
- **Skirts (for girls):** Classic Navy Blue plaid. Must be at least top of knee length.
- **Tie (for boys):** Classic Navy Blue plaid.
- **Cross Tie (for girls):** Classic Navy Blue.
- **Sweater:** Classic Navy Blue.

Field Trip Uniform

- WCA spirit tee shirts may be worn on field trip days.
- Pants or shorts of the student's choosing. Shorts must be fingertip length.

Sweaters, Hoodies and Jackets

- Sweaters are allowed over uniforms. However, they must be a solid Navy Blue only.
- No brand logos or pattern designs, only school logos.
- Hoodies, jackets, and raincoats are to be worn outdoors only.

Shoes

- Shoes must be white, black, brown, navy, or gray with no open toes.
- They should be suitable for outdoor PE and recess activities.
- Shoes must be kept on at all times during school hours.
- Flip-flops, sandals, and high-heels are not allowed.

Hair

- Students' hair should be neatly combed or brushed, trimmed, and presented in an attractive manner.
- For boys, hair should be trimmed above the collar. Ponytails and facial hair are not acceptable.

- Shaved heads are not acceptable except for medical reasons.
- Extreme or unnatural hairstyles or coloring are not allowed, and neither are styles or lengths that obstruct the eyes.

Jewelry

- Girls are allowed to wear jewelry in conservative quantities. Earrings should be small and secure, and only one pair is permitted.
- Boys are not allowed to wear earrings, and any neck jewelry must be worn underneath clothing.
- Facial or tongue jewelry of any kind is not allowed.

Disallowed Items

- Tight-fitting skinny pants, patterned pants, blue jeans, cargo pants or shorts, ripped clothing or athletic wear are not allowed.
- No hats or headgear of any kind are allowed during school hours.

Violation of the Dress Code

Violation of the Dress Code will result in notifying the parents to bring the approved clothing. Should the student repeatedly violate the Dress Code, the students will be subject to disciplinary action in accordance with the School Disciplinary Policy.

Student Signature _____

Parent Signature _____

Date: _____



Photo Release Form

Dear Parents:

To help acknowledge student success stories and promote the school, we regularly post photos, videos and audio recordings on the school website, Facebook page and other social media. This photo release form lets us know you've given us permission to use your child's photos, videos, and audio recording.

We will use your child's photos, videos and audio recordings in school brochures, in the news media or other organizations for school-related stories or articles. We will ask your specific permission should your child be invited to do an interview with the media.

I hereby grant Wellington Collegiate Academy permission to use my child's photos, videos and audio recordings for advertising and other purposes on the school website, Facebook page, school brochures and other social media. I understand and agree that WCA may use these photos, videos and audio recordings in subsequent school years. I further grant WCA permission to allow my child to be photographed, videoed, audio recordings or interviewed by the news media or other organizations for school-related stories or articles.

Student's name: _____

Parent's/Guardian's Signature _____ Date: _____

Parent's/Guardian's Signature _____ Date: _____



Emergency Contact and Pick-Up Authorization

Student Name: _____

Emergency Contact Information: Person(s) to contact in case of emergency when unable to reach parents.

Emergency Contact #1

Name: _____ Relationship: _____

Primary # _____ Alternate # _____

Emergency Contact #2

Name: _____ Relationship: _____

Primary # _____ Alternate # _____

Pick-Up Authorization: Other people permitted to pick up child:

Name: _____ Relationship: _____

Primary # _____ Alternate # _____

Name: _____ Relationship: _____

Primary # _____ Alternate # _____

Name of Person Completing Authorization:

Phone# _____

Signature: _____

Date: _____



PARENTAL ACKNOWLEDGMENT AND CONSENT FOR TRANSPORTATION AND EDUCATIONAL FIELD TRIP PARTICIPATION

At WCA, we refer to our field trips as "Educational Field Trips" because they encompass more than just guided tours, they also include engaging STEM programs. We take every measure to ensure our students are safe and well cared for during these trips. While participation in these trips is mandatory and graded, we understand that some parents may prefer that their child not participate. In such cases, students will be given alternative assignments. We encourage all students to take advantage of learning opportunities outside the classroom.

Our students and families are at the heart of everything we do. The relationships we've built with our students, alumni, and families are our greatest priority. If you ever have questions or concerns, we are always here to assist and support you.

In the rare event that an issue cannot be resolved through our mandatory informal dispute resolution process which includes in-person meetings or telephone, video conference discussions, Wellington Collegiate Academy and its students and families agree to address the matter through binding individual arbitration. Class and representative actions are not permitted. During arbitration, an impartial arbitrator will review the dispute, consider both sides, and issue a binding decision. The arbitrator follows the same legal standards as a court and can award the same individual remedies. Arbitration is designed to be streamlined, with limited discovery and appellate review, ensuring a fair and efficient resolution. This approach protects all parties, minimizes undue financial burdens, and ensures that disputes are handled equitably.

By signing, I confirm that I have read and agree to the terms knowingly and voluntarily. I also confirm that I am the parent or legal guardian of the named student.

I, _____ parent/ legal guardian of _____
who is in _____ grade, give permission for my child to participate in WCA's Educational Field Trips.

Date

Parent or Legal Guardian Signature
(type your name in lieu of signature)



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Recommendation Form (Optional) PRINCIPAL OR COUNSELOR

To the Student:

Please fill in the information directly below. Give this form and a stamped envelope addressed to Wellington Collegiate Academy to your head of school, principal, guidance counselor or placement counselor. A parent/legal guardian must also sign this form before submission to the Principal/Counselor.

Name of Applicant _____ Applying for grade _____

Recommender's Name _____ Position _____

Current School Name _____

School Address _____

Parent / Legal Guardian:

By submitting this evaluation form and your application for consideration by the Wellington Collegiate Academy, you agree that the information provided will be held in the strictest confidence and will not be shared with students, parents, or guardians. This evaluation will remain confidential and does not become part of the student's permanent academic record.

Parent or Guardian Signature _____ Date _____

To the Principal / Counselor:

Wellington Collegiate Academy is a small private school whose success is achieved from a strong integration of each new student. We are aware that grades and test scores all by themselves do not give an accurate depiction of a prospective student. We rely greatly on your recommendations as well as our interactions with the student. Please be as candid as possible. This recommendation will remain confidential and will not be shared with students, parents, or guardians.

We would appreciate any insight you can give us on this student's talents and gifts, as well as their weaknesses and shortcomings. Our school employs a rigorous curriculum. It is our goal before we accept a prospective student to identify any behavioral issues or learning disabilities beyond our scope. We also want to be aware of any exceptional qualities or attributes.

Please mail form directly to: Wellington Collegiate Academy • 12794 Forest Hill Blvd. 14B, Wellington, FL 33414

Applicant Description

Thank you for filling out this description. We realize that such checklists are inexact. We welcome any comments or qualifications you may wish to add in the margins or in a separate letter.

Background

1) How long have you known this student?

2) How well do you know the student as a person?

3) What are three words to describe this student?

Character and Intellectual Ability Assessment

Please rate student relative to appropriate age level:	Cannot Judge	Poor	Below Average	Average	Above Average	Excellent
Attention Span						
Attitude toward school						
Concern for others						
Cooperation						
Displays appropriate conduct						
Emotional maturity						
Expression—Oral						
Expression—Written						
Leadership potential						
Motivation						
Peer relations						
Personality						
Reaction to criticism/set-backs						
Reading comprehension						
Responsibility						
Self-confidence						
Sense of humor						
Overall Evaluation as a Person						
Overall Evaluation as a Student						

Academic Conduct

Does the student attend class regularly? ☐ No ☐ Yes

Does the student arrive at class on time? ☐ No ☐ Yes

Is there any reason to doubt the applicant's academic integrity? ☐ No ☐ Yes

Explain: _____

Has the applicant ever been dismissed or suspended from school? ☐ No ☐ Yes

Explain: _____

Problems with drugs, alcohol, tobacco, bullying, fighting, theft, etc? ☐ No ☐ Yes

Explain: _____

Parental Involvement

What is the parent's attitude toward their child's learning and study habits?

Have the parents cooperated with school policies and teacher's suggestions?

=====

Wellington Collegiate Academy has my permission to receive the information above.

Print Name of person completing form _____

Signature of person completing form _____

Title _____

Date _____ School Name _____

Phone _____ Email _____

Please submit the form by mail or email:

Wellington Collegiate Academy
12794 Forest Hill Blvd. 14B, Wellington, FL 33414

Email: info@gowca.org