

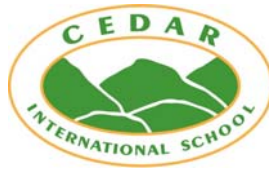
# *Building For Your Child's Future*

*Cedar International School  
P.O. Box 3109  
Kingston, Tortola  
British Virgin Islands*

*Cedar International School  
P.O. Box 8309  
St. John  
USVI 00831*

*Please visit our website at: [www.cedarschoolbvi.com](http://www.cedarschoolbvi.com)*

P.O. Box 3109  
Road Town, Tortola  
British Virgin Islands  
VG1110



USA Postal Address:  
PMB 5000  
P.O. Box 8309  
USVI 00831

## **Cedar International School Admission and Tuition Procedure**

Parents are encouraged to apply as soon as possible to ensure a place at Cedar International School. Grade placement is determined by the Head of School and is based predominantly on a child's age, however academic skill level and social maturity will be taken into account. A copy of Transcripts, Passport/Birth Certificate, Immunization /Health Record and a completed Teacher/Principal Evaluation Form are required for entry into Cedar School.

**Permission for prospective students born outside the BVI must also be granted by the BVI Education and Immigration Departments before they can be officially enrolled at Cedar School.**

### **Admission and Registration Fees**

**\$300.00**      **Application Fee** (non-refundable) is charged to all students applying for admission.

**\$1500.00**      **Entrance Fee** (non-refundable) is assessed to each incoming student which is used for improvement of the school facilities and the academic programme offered to the students.

### **Pre-Enrollment /Tuition Fees**

**Pre-Enrollment** (10% of annual fee) is charged to insure a place in the class enrolled. This tuition related amount is applied to the last month of the school year (June) and is non-refundable and non-transferable. For new students, Pre-Enrollment is to be paid when the student is registered for school.

**Tuition** for each grade is based on an annual fee (September to June) that is paid in installments at either the beginning of each month or each term. Please specify your preference.

**12% Late Fee** is assessed for any tuition payments that are 10 days overdue. Payments made will be credited against the oldest invoice outstanding. If fees are not paid in 45 days from the due date, a student may not continue to attend the school.

- Unpaid fees for more than thirty days will be charged interest at the rate of 1.5% /month. If any fees are outstanding, grade reports, progress reports and transcripts will not be released.
- \*All books/supplies issued by the school are the property of the school and students will be expected to pay for lost or damaged books or supplies.
- \$50.00 charge will be applied to cheques returned.
- Fees may be paid with cash, cheque, or credit card (MasterCard or Visa).

# IMPORTANT

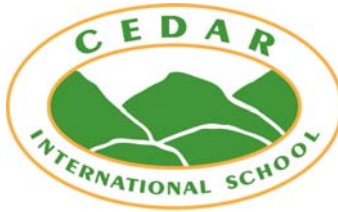
In the British Virgin Islands, all children age five and over who are not BVI Belongers must have permission to attend school. This permission is granted by the Education Department in conjunction with the Immigration Department.

For permission to be granted the following conditions must be met:

- The Parent/guardian must regularize the child's immigration status with the BVI Government Immigration Department. Please contact the Immigration Department in Road Town directly.
- An Application for Entry into the British Virgin Islands Schools by Non British Virgin Islanders must be completed and submitted to the Department of Education. Supporting documents must be submitted with the application as well as a letter from public or private school indicating that there is space available for the child.

**It is a violation of the law for a child who is not a BVI Belonger to attend school without permission.**

# IMPORTANT



## Cedar International School Schedule of Fees for School Year 2008-2009

### Kindergarten

Grade Level	Annual Tuition	Term Payment	Monthly Payment
Lower Kindergarten	\$7,750	\$2,583	\$795
Upper Kindergarten	\$7,750	\$2,583	\$795
Primary Transition	\$7,750	\$2,583	\$795

### Primary

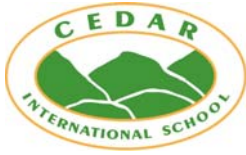
Grade Level	Annual Tuition	Term Payment	Monthly Payment
Grade 1	\$9,370	\$3,123	\$957
Grade 2	\$9,370	\$3,123	\$957
Grade 3	\$9,370	\$3,123	\$957
Grade 4	\$9,780	\$3,260	\$998
Grade 5	\$9,780	\$3,260	\$998

### Secondary

Grade Level	Annual Tuition	Term Payment	Monthly Payment
Grade 6	\$11,220	\$3,740	\$1,142
Grade 7	\$11,220	\$3,740	\$1,142
Grade 8	\$11,220	\$3,740	\$1,142
Grade 9	\$11,400	\$3,787	\$1,156
Grade 10	\$11,400	\$3,787	\$1,156
Grade 11	\$11,550	\$3,850	\$1,175
Grade 12	\$11,550	\$3,850	\$1,175

**Please note that if you pay either by the term or annually you will benefit from a total annual discount of \$200.**





## Parental Authorization for Release of Records and Student Evaluation

Dear Parents/Guardian: Complete the following section and send it directly to your child's present school authorizing release of records. Please print or type. Evaluations become the confidential property of Cedar International School and are not subject to parental review.

Dear Principal/Counselor/Teacher,

\_\_\_\_\_ (Child's Name) \_\_\_\_\_ (Date of Birth - Day / Month / Year)

\_\_\_\_\_ (Date of Withdrawal) \_\_\_\_\_ (Grade at Time of Withdrawal)

Signature \_\_\_\_\_ Date \_\_\_\_\_ Relationship to child \_\_\_\_\_

I have made application for my child to attend Cedar International School, Tortola BVI. I give permission for you to please release the following information concerning my child:

The Official School Transcript that includes:

1. Standardized Tests (Intelligence, Aptitude, Achievement)
2. Academic Performance (Classroom grades or evaluation and special education)
3. Learning Styles Inventory
4. Health records

Name of Releasing School: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-mail: \_\_\_\_\_ Telephone/Fax: \_\_\_\_\_

To be completed by the Evaluator:

Evaluator \_\_\_\_\_ Title \_\_\_\_\_ School Stamp/Seal

1.) How long has the student been enrolled in your school? \_\_\_\_\_

2.) How long have you known the student? \_\_\_\_\_

3.) To your knowledge has the student had any history of serious conduct problems?  No  Yes  
If yes, please explain \_\_\_\_\_

4.) Has the student ever been suspended or expelled?  No  Yes  
If yes, please explain \_\_\_\_\_

5.) To your knowledge, has the applicant had any history of involvement with drugs, alcohol or juvenile delinquency problems?  No  Yes  
If yes, please explain \_\_\_\_\_

6) Does this student have any unique talents? If so, what? \_\_\_\_\_

7) Does the student have any learning difficulties, If so, what? \_\_\_\_\_

8) Are the accounts for this student paid and up to date?  No  Yes  
Have the materials and resources been returned?  No  Yes

9) Is the student presently on an IEP? If yes, please attach copy \_\_\_\_\_

Please complete the form below. As with the above questions, you may decide to confer with a colleague to complete your evaluation.

	Unsatisfactory	Below Average	Average	Good	Excellent	Not Observed
Motivation						
Self Discipline						
Growth Potential						
Leadership						
Personal Appearance						
Self-confidence						
Warmth of Personality						
Sense of Humor						
Concern for Others						
Emotional Maturity						
Personal Initiative						
Reactions to Setbacks						
Respect for Authority						

**REGISTRAR:** Please send this student's records and evaluation to the address below:

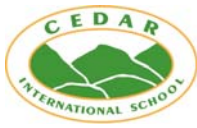
**In the BVI:**

Attn: Admissions Office  
Cedar International School  
PO Box 3109  
Road Town, Tortola, BVI

Telephone: (284) 494-5262 or (284) 494-4864

**Outside the BVI:**

Attn: Admissions Office  
Cedar International School  
PMB 5000  
PO Box 8309  
Cruz Bay, USVI 00831  
Fax: (284) 495-9695



# Cedar International School

## Student Emergency Information 2008/09

This form is to be completed at the beginning of each academic year and returned before September 17th:

1.) Name \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_ Grade \_\_\_\_\_

2.) Name \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_ Grade \_\_\_\_\_

3.) Name \_\_\_\_\_ Date of Birth \_\_/\_\_/\_\_\_\_ Grade \_\_\_\_\_

### Parent /Guardian contact information;

Mother / Guardian Name \_\_\_\_\_

Contact telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

This email may be used by the school for confidential communication related to financial, health or other personal school matter. Yes / No

Employer \_\_\_\_\_

Father /Guardian Name \_\_\_\_\_

Contact telephone (home) \_\_\_\_\_ (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_

This email may be used by the school for confidential communication related to financial, health or other personal school matter. Yes / No

Employer \_\_\_\_\_

Physical address \_\_\_\_\_

Mailing address \_\_\_\_\_

### Emergency Contacts if Parent / Guardian cannot be reached (as agreed with below)

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Contact # \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Contact # \_\_\_\_\_

Please turn over and complete the other side.

**Health update, since last year:**

**Child #1:**Recent immunizations: Y / N (details, if yes) \_\_\_\_\_

Recently diagnosed conditions: Y / N (details, if yes) \_\_\_\_\_

Allergies: Y / N (details, if yes) \_\_\_\_\_

Current medications : \_\_\_\_\_

prescribed for : \_\_\_\_\_

Other: \_\_\_\_\_

**Child #2:**Recent immunizations: Y / N (details, if yes) \_\_\_\_\_

Recently diagnosed conditions: Y / N (details, if yes) \_\_\_\_\_

Allergies: Y / N (details, if yes) \_\_\_\_\_

Current medications : \_\_\_\_\_

prescribed for : \_\_\_\_\_

Other: \_\_\_\_\_

**Child #3:**Recent immunizations: Y / N (details, if yes) \_\_\_\_\_

Recently diagnosed conditions: Y / N (details, if yes) \_\_\_\_\_

Allergies: Y / N (details, if yes) \_\_\_\_\_

Current medications : \_\_\_\_\_

prescribed for : \_\_\_\_\_

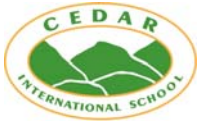
Other: \_\_\_\_\_

Doctor's name: \_\_\_\_\_ Phone # \_\_\_\_\_

Dentist's name: \_\_\_\_\_ Phone # \_\_\_\_\_

**Please read and sign:** In case of a medical emergency, I authorize Cedar International School personnel to obtain any emergency medical care (incl Peebles Emergency Room) that may be necessary.

Mother / Guardian \_\_\_\_\_ Father /Guardian \_\_\_\_\_



**Cedar International School Health Form**  
**PO Box 3109, Road Town, Tortola, British Virgin Islands**  
**Phone (284) 494-5262 Fax (284) 495-9695**

Name of Student \_\_\_\_\_ Date of Birth \_\_\_\_\_

Parent / Guardian Name \_\_\_\_\_ Tel: \_\_\_\_\_

Physician Name and Address \_\_\_\_\_ Tel: \_\_\_\_\_

**Please provide details if YES applies;**

Epilepsy / seizure disorder Y / N \_\_\_\_\_ Medication \_\_\_\_\_

Asthma Y / N \_\_\_\_\_ Medication \_\_\_\_\_

Allergies Y / N \_\_\_\_\_ Medication \_\_\_\_\_

Diabetes Y / N \_\_\_\_\_ Medication \_\_\_\_\_

Cardiac condition Y / N \_\_\_\_\_ Medication \_\_\_\_\_

Other Y / N \_\_\_\_\_

Significant family health history Y / N \_\_\_\_\_

Previous operations /surgery Y / N \_\_\_\_\_

Other medications Y / N \_\_\_\_\_

**Please complete fully OR provide a photocopy of the immunization record.**

<b>Vaccine</b>	<b>Initial (infant)</b>	<b>Second (infant)</b>	<b>Third (infant)</b>	<b>First Booster</b>	<b>Second Booster</b>	<b>Third Booster</b>
<b>DTP or DT</b> Diphtheria Tetanus Pertussis						
<b>Polio</b>						
<b>MMR</b> Mumps Measles Rubella						
<b>BCG</b> (Tuberculosis)						
<b>Hib</b> H.influenza Type B						
<b>Hepatitis B</b>						
<b>Other</b>						

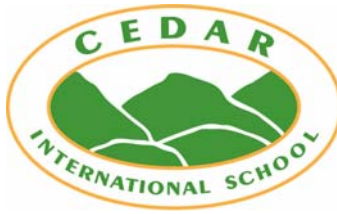
**Physical Examination by physician.**

Date		Comments
Height		
Weight		
Vision w/glasses	Right Left	
Vision w/o glasses	Right Left	
Hearing		
ENT		
Heart		
Lungs		
Breasts		
Abdomen		
Genitalia		
Muscular- Skeletal		
Posture & Feet		
Skin		
Speech		

Comments and Recommendations from Physician (with date and authorizing stamp):

Is this child fit and healthy Y / N

Physician's Signature \_\_\_\_\_ Date \_\_\_\_\_



PO Box 3109 • Road Town • Tortola • British Virgin Islands • VG1110  
US Mailing Address: PO Box 8309 • PMB 5000 • Cruz Bay • USVI • 00831  
www.cedarschoolbvi.com • Email: cedarsch@surfbvi.com • Tel: (284) 494-5262 • Fax: (284) 495-9695

3 September 2008

Dear Parents,

The Cedar International School After-School Care Program will continue to offer its services on campus beginning Monday, September 8, 2008. The Care Program is open to children ages 4-10 between the hours of 3:15 – 5:30 pm. A light snack/drink is provided as well as the opportunity for the older primary students to complete homework. Please make every effort to pick your child(ren) up on time.\*

**(1) Regular Care:** Daily care for children after school for no less than 4 days per week. For a 5 day week cost is \$50/child/week and \$30 for each additional child from the same family. For a 4 day week, Cost is \$40/child.week and \$24 for each additional child from the same family.

**(2) Drop-In Care:** Occasional care for children according to prior arrangement via phone or sign-up sheet no later than 2:30 pm on the day of the drop-in. A sign-up sheet is in the administration office for parents to use. The rate is \$12/day and \$8 each additional child. Drop- in participants will be billed at the end of the month.

**(3) \*Late Rate:** Parents who are late picking up their child(ren) from either regular school, after-school clubs or after-school care will be charged the late rate of \$10.00 per 15 minutes.

-----Permission Slip-----Required for Participation

- 1.) I would like to secure **Regular** placement for \_\_\_\_\_.  
(name)
- 2.) I would like the opportunity for \_\_\_\_\_ to **Drop-In** on occasion.

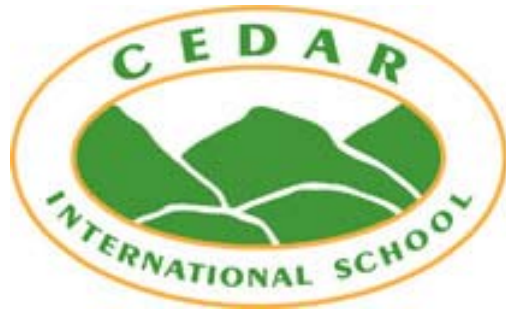
\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date



Accredited by the Council of International Schools and the Middle States Association of Colleges and Schools  
International Baccalaureate World School





## 2008-2009 Calendar (180 days)

August 2008

S	Mo	Tu	We	Th	Fri	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

September 2008 (20 days)

Su	Mo	Tu	We	Th	Fri	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

October 2008 (21 days)

Su	Mo	Tu	We	Th	Fri	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

### Trimester 1: September 3-November 26, 2008 (59 days)

- August 16 New teachers arrive in BVI
- August 18-22 Immigration process for new teachers
- August 25-26 New teacher orientation
- August 27-September 2 Professional Development
- September 3 School starts
- October 17 Professional Development
- October 20 St. Ursula's Day/mid-trimester break
- November 26 Last day of trimester one

November 2008 (18 days)

S	Mo	Tu	We	Thu	Fri	Sa
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

December 2008 (12 days)

Su	Mo	Tu	W	Th	Fri	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

January 2009 (20 days)

Su	Mo	Tu	We	Th	Fri	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

### Trimester 2: November 27– March 13, 2009 (58 Days)

- November 27-28 Hurricane Makeup Days
- December 5 Professional Development Faculty team meetings
- December 18-January 4 Holiday vacation
- January 5 Classes resume
- February 12-13 Mid-trimester break
- March 2 H. Lavity Stoutt's Birthday
- March 9 Commonwealth Day
- March 13 Last day of trimester two

February 2009 (18 days)

S	Mo	Tu	We	Th	Fri	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28

March 2009 (19 days)

Su	Mo	Tu	We	Th	Fri	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

April 2009 (14 days)

Su	Mo	Tu	We	Th	Fri	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

### Trimester 3: March 16—June 26, 2009 (63 days)

- March 23 Professional Development Faculty team meetings
- April 8-19 Spring vacation
- May 29 Mid-trimester break
- June 1 Whit Monday
- June 26 Last Full Day KG/Primary Awards (AM) Senior Awards & Graduation (PM)
- June 30 Last day of work for teachers

May 2009 (20 days)

S	Mo	Tu	We	Th	Fri	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

June 2009 (19 days)

Su	Mo	Tu	We	Th	Fri	Sa
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

July 2009

Su	Mo	Tu	We	Th	Fri	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		