



Application Form
2018-2019

Education For Life

CHA APPLICATION CHECKLIST

STEP 1 Come for a tour!

Call the Admissions Office at 858-566-1996 x1203 and arrange a visit to the CHA campus.

STEP 2 The Application: Complete the application form and return to CHA.

Your application is not complete without the following items:

1. Completed application packet
2. Copies of report cards for the past two years when applicable
3. Request to forward School Records Form (please fill out top portion)
4. Teacher Questionnaire (Please fill out the top portion and give it to your child's current teacher with the envelope provided. They will mail it directly to CHA)
5. Non-refundable application fee of \$600 for all applicants. It must be enclosed with this completed application to begin processing. The application fee is refundable ONLY if your child is not admitted by the school.
Please make the check payable to Chabad Hebrew Academy

STEP 3 If Applying for Tuition Assistance:

Families wishing to apply for financial aid should request, complete and submit a PSAS form. Tuition assistance is contingent on the funds available and will be awarded in as timely a manner as possible and are based on financial need.
If awarded tuition assistance, parents meet with financial aid director for signature and acceptance.

STEP 4 The Interview:

Once all application materials listed in step 2 are submitted, you will be scheduled for:
A student assessment and/or a shadow day (Students are typically assessed in the classroom environment)

STEP 5 Admission Decision:

Decision Letters will be mailed within 14 days of the interview. Please be advised that all application materials are required before an applicant's file can be reviewed for admission to CHA.

STEP 6 Tuition Fees and Schedules:

The fees and schedules agreement and contract needs to be initialed and signed.
A FACTS account needs to be set up by the parents.
The first payment needs to be submitted.

New Student Application

STUDENT INFORMATION

Last Name: _____ First: _____ Grade Entering 18/19: _____

Hebrew Name: _____ Gender: _____ Birth Date: / /

Home Address: _____

City: _____ State: _____ Zip: _____

CURRENT SCHOOL

Name of School: _____ Dates of Attendance: _____

Address: _____

Name of School District: _____ Principal/Head: _____

School Phone Number: _____ Current Teacher: _____

SCHOOLS PREVIOUSLY ATTENDED

Name of School: _____ Dates of Attendance: _____

Name of School: _____ Dates of Attendance: _____

PARENT'S INFORMATION

Last: _____ First: _____ Title: _____

Home Address:(if different from student) _____

City: _____ State: _____ Zip: _____

Home Phone:(____) _____

Cell: _____ E-mail: _____

Place of Employment: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Profession: _____ Position/Title: _____

Work Phone:(____) _____

PARENT'S INFORMATION

Last: _____ First: _____ Title: _____

Home Address:(if different from student) _____

City: _____ State: _____ Zip: _____

Home Phone:(____) _____

Cell: _____ E-mail: _____

Place of Employment: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Profession: _____ Position/Title: _____

Work Phone:(____) _____

Parents are: (circle if applicable): Married Separated Divorced Single Mother Remarried
Father Remarried Mother Deceased Father Deceased

STUDENT APPLICATION
2018-2019

Applicant Lives With: _____ Financially Responsible Party: _____

Synagogue Affiliation: _____

Is the applicant adopted? (please circle) Yes No

Was the applicant converted? (please circle) Yes No

Siblings:

Name: _____ Birth Date: / / Current School: _____

Name: _____ Birth Date: / / Current School: _____

Name: _____ Birth Date: / / Current School: _____

Please list any friends or relatives who have attended Chabad Hebrew Academy:

Name: _____ Relationship: _____ Class of: _____

Name: _____ Relationship: _____ Class of: _____

Name: _____ Relationship: _____ Class of: _____

Name: _____ Relationship: _____ Class of: _____

STUDENT INFORMATION

Please describe the educational environment that you are seeking for your child. _____

Why are you interested in CHA for your child? _____

What would you like us to know about your child? _____

What are your expectations of your child's CHA educational experience? _____

How would you describe your child's academic performance to date? _____

Tell us about any special interests/talent in music, art, religion, athletics, academics that your child has. _____

How would you describe your child's personality? _____

Has your child ever received educational support or tutoring outside the school setting? _____

What was the reason? _____

Is there a significant incident, major event or experience (relocation, change in the family, loss of a loved one) that has occurred during your child's lifetime that may help us better understand your child? _____

Please describe any special requirements that your child may have. (e.g. medications, attention to allergies, dietary restrictions, etc.) _____

Has a previous school recommended that your child receive: (circle all that apply)

occupational therapy speech therapy educational therapy

educational evaluation (ie. IEP testing)

What was the result? _____

How did you hear about Chabad Hebrew Academy? _____

We were referred to Chabad Hebrew Academy by the _____ family.

Parent Signature:

Date:

STUDENT APPLICATION
2018-2019

FINANCIAL INFORMATION

Application Fee:

A \$600 application fee is due with this paperwork in order for it to be processed. Please make all checks payable to Chabad Hebrew Academy. The application fee is refundable only if your child is not recommended for admission by the school.

Tuition Fees:

Grades	2018/2019 Tuition Rate
K	\$13,130
1-5	\$18,280
6-8	\$19,315

\$600 Application Fee is not included in tuition amount.

Payment Schedule: Please circle and initial your desired payment schedule

Schedule A: The full year's tuition is paid by February 1, 2018. Families who elect Schedule A will receive an additional 1.5% discount. Direct payment can be made to CHA by check or credit card. A 3% additional charge will apply to those who pay by credit card. _____
(Initial)

Schedule B: 3 equal payments of the full year's tuition on February 1, 2018, May 1, 2018 and November 1, 2018. First payment is made directly to CHA. Enrollment in a FACTS tuition account is mandatory to complete the application. The 2 remaining payments of May 2018 and November 2018 will be processed by FACTS. _____
(Initial)

Schedule C: 10 installments of the total tuition amount with the first payment made directly to CHA by February 1, 2018 and deposited on February 3. Enrollment in a FACTS tuition account by February 1, 2018 is mandatory to complete the application. The 9 remaining payments from March 2018 through November 2018 will be processed by FACTS. _____
(Initial)

FACTS Tuition Account:

Please enroll in a FACTS tuition account by signing up at <https://online.factsmgt.com/signin/48JJS> or by requesting paper forms at the CHA Business Office.

Please check here if you would like to receive an application for Financial Aid. A Financial Aid packet will be emailed to you. Applying for financial aid will not impact your child's admission to Chabad Hebrew Academy.

Other Tuition Discounts:

Chabad Hebrew Academy offers tuition discounts to those students who fall into the following categories:

1. Families who enroll three or more students in Chabad Hebrew Academy will receive a 20% multiple child discount on the tuition of the third and fourth child. Each child enrolled beyond the fourth child will receive a 50% tuition discount. The discount will be deducted from the youngest child/ren's tuition. Infant program not included.

2. Children of Chabad Hebrew Academy faculty and staff automatically receive a 20% discount for each child.

**Method of Payment – FACTS Tuition Management Services:
One agreement per family**

CHA utilizes FACTS Tuition Management Services for collecting and processing all tuition and fees. FACTS charges \$45 annually to process payment. There is a \$25 charge for any payment returned from the bank or NSF. For those who use credit cards, there is a 2.5% fee. Please enroll in a FACTS tuition account by signing up at <https://online.factsmgt.com/signin/48JJS> or by requesting paper forms at the CHA Business Office. If you would like to pay FACTS by credit card, please contact the school business office. Families who choose to pay the balance of tuition in full by February 1, 2018 are not required to set up a FACTS account.

The privileges of Chabad Hebrew Academy will be denied to any student whose parents fail in their financial obligations to the school. The school reserves the right to withhold transcripts and/or grades, to deny attendance, and to dismiss students whose accounts include excessive overdue balances. (An excessive overdue balance includes being behind in payment for two or more months.) A late payment fee of 1.5% per month (18% per year) will be applied to any overdue accounts. The late payment fee is applied automatically to student accounts on the first day of each month for any outstanding balances from prior months. Unpaid accounts will be subject to legal action for collection. Parents/guardians will be responsible for any/all legal and collection costs incurred by the school.

Referrals:

We would like to thank our parents for their dedication and commitment to CHA. Our school's mission is to provide a meaningful and positive Jewish foundation for the leaders of tomorrow. A strong CHA enrollment benefits all aspects of the school and allows many more students to receive a valuable Jewish education. CHA is honored to provide a \$300 tuition credit upon referral of any family that results in enrollment in Kindergarten through 8th Grade. CHA will provide a \$250 credit for every referral that results in a family's enrollment in preschool. Only one referring family name may be written on each new family enrollment form and only one family will be issued the tuition credit. Newly enrolling families with both K-8 and preschool children will result in one tuition credit totaling \$300.

Transportation:

Transportation is currently available from La Jolla and Carmel Valley. The annual Transportation Fee is \$1,700. Space is limited.

Financial Aid:

Financial Aid is available on a limited basis. In order to qualify for financial aid, the application packet and financial aid application must be completed, signed and returned with the application fee of \$600, on or before February 1st, 2018. Families of applying students will be notified as soon as possible regarding their financial aid grant. If the applicant does not receive a scholarship, the \$600 application fee will be returned.

TUITION CONTRACT
2018-2019

All tuition is payable in advance unless the parent has made arrangements to participate in the FACTS three payment or ten payment plan. Enrollment is for the academic year that begins August 28th, 2018 and ends June 12th, 2019. **Tuition payments must begin on February 1, 2018.** If a student is accepted and enrolls after February 1, upon enrollment, parents must remit all tuition payments missed between February, 2018 and the enrollment date. (Parent or guardian is asked to initial here to indicate agreement. _____)

Enrollment for the 2018-2019 academic year may be cancelled by submitting a written cancellation notice prior to May 1, 2018. Application Fee is non-refundable. If enrollment is cancelled after May 1, 2018, the parent or guardian is obligated to pay the equivalent of three months tuition. If cancellation occurs after July 1, 2018, the parent or guardian is responsible for the full years' tuition. (Parent or guardian is asked to initial here to indicate agreement. _____)

Payment of the Application Fee reserves a place for your child for the 2018-2019 school year. Enrollment is not considered final, however, until arrangements for payment of all tuition and fees have been finalized, and this contract has been signed by the family and a representative of Chabad Hebrew Academy. (Parent or guardian is asked to initial here to indicate agreement. _____)

For your convenience, CHA utilizes FACTS for tuition collection services. All families electing to pay for school tuition in more than one payment must have a fully set up and completed FACTS account before admission is considered final. If any changes of account information are required, please notify the CHA Business Office. (Parent or guardian is asked to initial here to indicate agreement. _____)

1.	Application Fee	\$600
2.	Tuition for above named student to attend Chabad Hebrew Academy	\$ _____
FEES:		
3.	Long Range Planning and Facilities Fee. Fully Tax Deductible (Per Family)	\$500
4.	Technology Financing Fee (Kindergarten through 8th grade)	\$250
5.	Transportation Fee (if applicable)	\$ _____
6.	Security Enhancement Contribution (Per Family)	\$180
Total:		\$ _____

PAYMENT INFORMATION

Please find my full tuition payment for the Schedule A payment plan or my first payment for Schedule:

B C (please circle one schedule)

Method of Payment (Please check one)

Check Number: _____

Credit Card Number: _____ Expiration Date: _____

V code: _____ Billing Zip Code: _____

By signing this application, I/We agree to be bound by the stated terms and conditions, and I/We hereby acknowledge that all the information provided is accurate and complete. I/We agree to pay all tuition and fees as stated.

Parent /Guardian's Signature

Parent /Guardian's Signature

Date

Please return this enrollment packet and your application fee to:

Office of Admissions
Chabad Hebrew Academy
10785 Pomerado Road
San Diego, CA 92131

ADMISSIONS CHECKLIST

- Completed and signed enrollment contract
- Application Fee
- Completion of "Step 2" on first page of this document
- Tuition Fees and Schedules initialed and signed
- FACTS account completed and verified

If you have any further questions, please feel free to contact:

Mrs. Susy Leff
Admissions Office
858-566-1996 ext 1203
sleff@chasd.org

Mrs. Dina Carlebach
Business Office
858-566-1996 ext 1219
ndcarlebach@chabadsd.org

Rabbi Shmuel Eber
Financial Aid Co-ordinator
858-566-1996 ext 1217
seber@chasd.org

Rabbi Josef Fradkin
Head of School
jfradkin@chasd.org

Mrs. Liz Earne
Principal
learne@chasd.org



Chabad Hebrew Academy 10785 Pomerado Rd. S. Diego CA 92131
Phone: 858-566-1996 Fax:858-695-3787 E-mail: admissions@chasd.org
www.chasd.org