

Study Concepts Inc

A whole new way to achieve excellence

ENROLLMENT FORM

Student Information			
First Name	MI	Last Name	e
Mailing Address			
School Attanding		Crado ICu	urrent/Rising)
			ty
Schedule Day: ☐ Saturday	Sunday		
Parent / Guardian Information (1)		Parent / Gua	rdian Information (2)
Name		Name	
Cell		Cell	
Email		Email	
Program Selection			
Program Name	Progra	m Name	Payment Plan Selection
KG-KIndergarten	Algebra-1 & English		□ Monthly
Grade 1 NNAT Prep (FCPS)	Geometry & English		☐ Half Term
Grade 2 COGAT Prep (FCPS) Grade 2 COGAT Prep (LCPS)	Geometry Algebra 2/Trigonometry		☐ Full Term ☐ Hourly
Gidde 2 COGAI Flep (LCF3)	Algebia 2/ iligor	iomeiry	liburry
Grade 3 NNAT Prep (LCPS)	Precalculus (Hon)/Math Analysis		☐ Friend Name
Grade 1 Enrichment	Calculus AB/BC		
Grade 2 Enrichment	Grade 8 TJ Prep		□ Event Name
Grade 3 Enrichment	Grade 8 AOS-AET Prep		□ I. da d Carach Na
Grade 4 Enrichment Grade 5 Enrichment	SAT Prep Other Programs		☐ Internet Search - Name
Grade 6 Enrichment	Offici Frograms		□ eMail from SCI
Grade 7 TJ AOS-AET Prep			
			\Box Others (specify)
			☐ Returning Student
Payment Information Depos	it BF Amount \$	<u>—</u>	CHECK#
Deposit -\$ Monthly -	\$ Prorat	ted -\$ Boo	oks/Supplies Fee -\$
bling (Grade:) Discount Amount \$		Total C	heck Amount \$
Make checks payable to Study C	oncepts Inc	Studer	nt's Start Date
Yes, I have read and accept	ed the tuition fee	policy Initials	s
Parent/Guardian Signature		Name	Date

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Facebook: https://www.facebook.com/StudyConceptsInc