

FRENCH IMMERSION PROGRAMME 2020 - Enrolment form

Arrival date:.....

Departure date :

STUDENT INFORMATION

Last name.....

First name.....

Date of birth Place of birth

Nationality..... Native language.....

Passport Nb..... Expiry Date

Home Address

.....

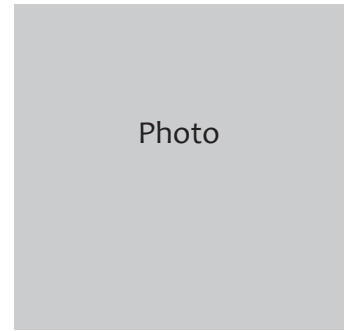
Zip code..... City..... Country.....

Phone number (home)..... Fax (home).....

Phone number (office) Fax (office).....

Mother's mobile phone..... Father's mobile phone..... Female Male

Parent's email address.....



OPTIONS

Flying (depending on weather conditions) - Discovery flight: **100 euros / session**

Horse Riding

MEDICAL INFORMATION

Blood group..... Date of latest anti-tetanus injection/...../.....

Specific medical condition or, allergy.....

Specific medical care or treatment.....

Name and phone number of your doctor.....

AUTHORISATION

I, the undersigned.....father/mother/legal guardian (delete as appropriate) of.....

.....Hereby authorise the principal of École des Roches or the school staff acting on his behalf to take any necessary emergency action, both medical and surgical, including hospitalisation, in case of illness or accident.

Date..... Place Signature

OTHER INFORMATION

How did you hear about our school?

Internet

a friend

an agency

your language teacher

other

(Specify the name of the website/friend/agency/language teacher:.....)

.....)



TERMS & CONDITIONS - FRENCH IMMERSION PROGRAMME 2020

RESPONSIBILITY

1. The school declines any responsibility if:

- Parents fail to inform us in writing of specific health problem affecting their child;
- The student does not respect the rules and regulations;
- The student leaves the school without proper authorisation.

2. The parents agree to subscribe to a medical insurance for the length of the French immersion programme. The school cannot be held accountable of any medical expenses, hospital, surgery, or else.

3. Upon arrival at school, the student must give his/her pocket money and valuables to the housemaster who will store them into the school empty box. If the student forgets or refuses to hand them in, the school will not be held responsible for any loss of related money or valuables.

4. In case of unacceptable behaviour, vandalism, disruption in class, disrespect towards adults and regulations, theft, consumption or possession of illegal substances or alcohol (in or out of school), the student will be immediately expelled. In such a case, the legal guardian or parents of the student will be informed and the school will take all necessary action to repatriate the students to his/her country of residence. The parents/legal guardian will bear all costs caused by the student being sent down from the school. Parents authorize the school to perform drug/alcohol tests on their child.

5. No refund will be granted in case of early departure for personal reasons.

6. In case of cancellation within 3 weeks before the beginning of the course, the deposit of 1000 € is due and will be kept by École des Roches.

7. The school does not ask parental authorisation for excursions included in the programme. In the perimeter of the school's standard policy, no written permission for an outing shall be asked directly by the child him/herself to the parents. If so, this outing is in no instance part of the summer camp, neither is it organised or supervised by the school. Parents will bear the sole responsibility of the child's safety until his/her return to the school. In any case, the student must respect the road traffic regulation and avoid hitchhiking. The school cannot, under any circumstances, be held liable for any incident which may occur during unauthorised trips off campus.

8. École des Roches has created a short guide book to make participants stay in our school easier. This document will be forwarded to every student prior to their stay. Student must read it before starting the camp.

Parents/guardian accept the terms & conditions

The student accept the terms & conditions

Date:.....

Date:.....

Parents/legal guardian signature:

Student's signature

.....

.....

CONTACT

For any request or enquiry, please contact our admissions office

École des Roches – BP 710 – 27130 Verneuil sur Avre
Tel +33(0)2 32 60 40 00 - Fax +33(0)2 32 32 25 28
ecoledesroches@ecoledesroches.com



PAYMENT - FRENCH IMMERSION PROGRAMME 2020

CREDIT CARD PAYMENT

Student's name

I hereby authorize École des Roches to charge my credit card VISA EUROCARD MASTERCARD as follows: :

- 1000 € today to confirm my child's reservation
- the remaining balance, 3 weeks before my child's arrival at Ecole des Roches.

Crédit card number :

|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|

Expiry date/...../..... Identification nb (3 last figures) |.....|.....|.....|
(cryptogram at the back of the card)

Card's holder signature

Payment by wire transfer (bank fees at your expense).

Name and address of the bank	Bank code	Sort code	BIC SWIFT	Account number	Key
CIC EURE ENTREPRISES Iban FR76 3002 7160 7900 0162 1120 164 49 rue Georges Bernard - 27000 EVREUX	30027	16079	CMCIFRPP	0016211201	64
HSBC France Iban FR76 3005 6009 2209 2200 0806 273 33 rue du Louvre – 75002 PARIS	30056	00922	CCFRFRPP	09220008062	73

Name of the beneficiary : ÉCOLE DES ROCHES - Reason of the payment : Name of the student



ARRIVAL FORM - FRENCH IMMERSION PROGRAMME 2020

STUDENT INFO

Last name.....First name.....

ARRIVAL : the flight must land at Orly between 10 am and 1 pm, or at Charles de Gaulle between 10 am and 3 pm.

ARRIVAL			
Date		Time	
Airport			
Flight nb*		Terminal	
Airline company			
Arriving from			
Unaccompanied Minor Service ** <input type="checkbox"/>			
(choose only if you have reserved this service through your airline company)			
Other info			

DEPARTURE : the flight must take off from Orly between 11 am and 1 pm, or from de Charles de Gaulle between 11 am and 3 pm

DEPARTURE			
Date		Time	
Airport			
Flight nb*		Terminal	
Airline company			
Arriving from			
Unaccompanied Minor Service ** <input type="checkbox"/>			
(choose only if you have reserved this service through your airline company)			
Other info			

*Please forward a copy of the e-ticket before arrival

**For UM students, please forward the UM form for the trip back to the country of residence.

Direct arrival at École des Roches

Direct departure from École des Roches

Other info:

Other info:.....

.....

PARENTS AUTHORISATION

RIGHT TO IMAGE

Pictures of your child may be taken during his/her school year at École des Roches and used for various publications (brochures, presentation flyers, website, social networks, newsletters, etc).

If you do not wish your child to appear in these publications, please send us your written request with your registration or re-registration.



OUTING AUTHORISATION

I, hereby.....(father, mother, guardian) of

Unless otherwise stated, I take note that during excursions organized by the school, our child will be allowed to remain unattended during free time

- in the provinces if she/he is 13 years old and older
- in Paris if she/he is 14 years old and older

By signing this document, I accept all the conditions specified therein and discharge École des Roches from any liability.

Date :

Signature :



SECURITY DEPOSIT

Student's name

I, the undersigned.....

Hereby authorize École des Roches to charge 300€ on my credit card VISA - EUROCARD - MASTERCARD to cover unpaid service, doctor fees, pharmacy, damages caused by the student and/or the transfer to the airport in case of exclusion.

The school will issue an invoice every time your credit card is debited.

Credit card number:

|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|.....|

Expiry date/...../..... Identification nb (3 last figures) |.....|.....|.....|
(cryptogram at the back of the card)

Date :

Signature



FORMULAIRE D'ÉVALUATION DU NIVEAU DE FRANÇAIS

A remplir par le professeur dispensant les cours de français et à faire valider par le directeur de l'école

Nom de l'élève concerné(e) :

Date de Naissance : / ___ / ___ / _____ /

Nationalité : Classe actuelle :

Nom du professeur :

Depuis combien de temps connaissez-vous cet élève ?

RENSEIGNEMENTS COMPLÉMENTAIRES SUR LE NIVEAU EN FRANÇAIS (Si l'élève est débutant, ne pas compléter la partie suivante)

Depuis combien d'années l'élève apprend-il le français ?

Dans quel cadre l'élève apprend-il le français ?

Programme école publique Programme école privée

Alliance française Cours particulier

Autre (précisez) :

Quel est le rythme d'apprentissage de l'élève ? (nbre d'heures de cours par semaine)

.....

Nbre d'élèves dans la classe ?

Méthode utilisée (titre des manuels)

L'élève a-t-il suivi une préparation à l'examen du DELF ?

L'élève a-t-il déjà obtenu un diplôme de DELF ? Si oui, lequel ?

Pouvez-vous situer le niveau de l'élève pour chaque compétence sur la grille du CECR ?

	A1	A2	B1	B2	C1
Production orale					
Compréhension orale					
Production écrite					
Compréhension écrite					

Personnalité de l'élève/sens de l'effort/ses des responsabilités/ facilité d'apprentissage/ attitude en classe/qualité du travail personnel/points faibles.

Formulez un commentaire qui permettra de mieux cerner le profil de l'élève :

.....

.....

.....

.....

.....

