

Re-Enrollment Form 2024-25
For Rosewood Academy and High School Records Only

Rosewood Academy and High School - Family Based Home Education Program

Parent/Guardian Name _____

Address _____ City _____

Zip _____ County _____ HM Phone _____

Cell Phone _____ Email _____

Student Information

Name	Age / DOB	Grade

Please read thoroughly and Initial each.

- I have read the guidelines and policies of RWA and understand and agree with them.
- I understand the re-enrollment fee is \$85 due upon re-enrolling with RWA and there is no refund if we leave the school at any time nor are books included in the fee. \$95 late fee after Aug. 1st.
- I understand there is a \$30 per child transfer fee for leaving RWA in the middle of the school year.
- I understand the RWA policy on student records and transcripts.
- I will keep RWA informed of new phone numbers or address changes.
- I understand that if a child moves in with another parent, enrollment does not transfer.
- I do not hold RWA, the administrator, staff members or volunteers liable for the education of my child, including purchasing of curriculum, grading or testing.
- I understand I am responsible of purchasing or obtaining all books or curriculum.
- I understand RWA is not state accredited nor wishes to be at anytime.
- I understand RWA fully places all responsibility of the education of my child on me, the parent. RWA is not required by law to make sure a child is learning.
- This form does not go to the BOE. Rosewood will not return this form to you. Keep a copy for you records.

Parent/Guardian Signature Date

Office Use CNT EM Date