

**E. H. Mott Learning Center
TUITION AND FEES CONTRACT**

This contract becomes effective upon the signature of the parent/guardian(s); upon acceptance by the Administrator of E. H. Mott Learning Center; and upon verification of an award from one of three Florida K-12 Scholarship programs (Florida Tax Credit Scholarship, Gardiner Scholarship or the McKay Scholarship). This contract contains the full agreement of the parties and no representation or assurance, whether verbal or written, shall affect or alter the obligation of either party hereto.

PAYMENTS

(initials) I (we) understand that by registering my (our) learner(s) and by providing a copy of a scholarship award letter, a space will be reserved in the applicable class, specifically for my (our) learner.

(initials) I (we) have received a copy of the current tuition and fee schedule for the E. H. Mott Learning Center.

(initials) I (we) understand that scholarship payments are made on a quarterly basis and will be sent to the E. H. Mott Learning Center. I understand that checks will be made payable to me(us), and will require that I/we endorse the check before E. H. Mott Learning Center can deposit the payment.

(initials) I (we) understand that I am responsible for the payment of all eligible expenses in excess of the amount of the scholarship award, in accordance with the terms agreed to between me(us) and the learning center administrator.

WITHDRAWALS/TRANSFERS

(initials) I (we) also recognize that as a private school, E. H. Mott Learning Center's budget is based largely on tuition revenues and contributions. Therefore, I (we) specifically agree that once my (our) learner(s) is (are) registered and guaranteed a space, if my (our) learner(s) is (are) withdrawn or dismissed for any reason, I (we) may be obligated to forfeit any tuition and fees that have been paid prior to the withdrawal or transfer; and I (we) may be obligated to pay for any outstanding tuition and/or fees through the end of the semester.

(initials) I (we) understand that in the event my (our) learner transfers to another school, I (we) agree that transcripts cannot be provide to that school until all financial obligations under this tuition contract has been satisfied.

(initials) I (we) understand that the learning center reserves the right to insist on the immediate withdrawal of any student whose presence in the learning center is considered detrimental either to the students' or to the learning center's best interest; and if the learning center requires the withdrawal of my learner, I will be obligated to pay tuition accrued to the date of withdrawal.

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ENFORCIBILITY

This Tuition and Fees Contract shall be interpreted and enforceable under the laws of the State of Florida. If any portion of this contract is found to be unenforceable by a court of law, then the remainder of said contract shall remain in full force and effect.

ACKNOWLEDGEMENTS

_____ I (we) acknowledged that I(we)will read and agree to abide by all policies of the
(initials) Parent/Student Handbook.

_____ I (we) acknowledge that, pursuant to the financial policies section of the Parent/Student
(initials) Handbook, transcripts, diplomas grades, etc. will not be released until all financial obligations under this tuition contract have been satisfied.

_____ I (we) acknowledge that I (we) have read the section on rules, policies, procedures and
(initials) discipline in the handbook and I (we) insist that my (our) learner(s) submit to the program of academic and disciplinary regulations, and to all other requirements instituted by the administrator and carried out by the staff, unless otherwise exempted.

_____ I (we) acknowledge that we have read, and do understand and agree to support and abide by
(initials) the conditions explained in this enrollment contract, and in the E. H. Mott Learning Center Handbook of the current year, and do declare that the information supplied on the application for enrollment is true and accurate to the best of my (our) knowledge.

_____ I (we) also agree to keep the learning center informed of any pertinent changes in my (our)
(initials) contact information.

Parent/Legal Guardian Signature: _____ Date: _____

Parent/Legal Guardian Printed Name: _____

Parent/Legal Guardian Signature: _____ Date: _____

Parent/Legal Guardian Printed Name: _____

Administrator's Signature: _____ Date: _____

Administrator's Printed Name: Carmen M. Hamer, M.S.