Independent Accommodation Request: CATS Academy Boston

Students who wish to live outside the Academy must have the approval of the Head of School. Permission will usually be granted if:

- The student will be living with their parents;
- The student will be living with a **close relative** over 25 years of age with full written permission from the student's parents (NB – this person **must meet with the Assistant Head of School** in person before permission will be granted).

All students need to understand that permission to live outside of Academy accommodation is given provided that students meet the following conditions during their time at the Academy:

- Academic work and progress must not suffer. Attendance must be 95% or above;
- The welfare of the student and other students must not be put at risk;
- Students and parents understand that matters of sickness, welfare and any other problems dealing with the authorities such as the police must be dealt with by the student/guardian as the college is no longer responsible.
- Only lunch will be provided by the Academy.
- Students understand the cost of living in private accommodation. (For example: heating, lighting, food, water, broadband, etc.) and that the Academy will not pay for these;
- All transport costs are payable by the student;
- Students must provide an up-to-date address and phone number to the Academy;
- If living in private accommodation leads to behaviour unacceptable to the Academy, students understand that this could affect their place at the Academy and may lead to disciplinary action.

To obtain permission from the Assistant Head of School, please complete the attached form and return it to Central Admissions as soon as possible. We will then contact you once the Head of School has assessed the application and made their decision. The Student Contract also needs completing before the student starts their studies.

Independent Accommodation Request Form

Student name: Huu Minh Pham

Date of Birth: 19/05/2001

Start Date: 09/05/2018

Reason for requesting private accommodation:

I would like to live with my aunt since my parents believe that would be beneficial for me to have a family member to take care and also more convenient than the dorm

Where does the student intend to live:

429 Adams Street Dorchester MA 02122

Name of person responsible for the student: Anh Thuong Hoang

Their relationship to the student: Aunt Their Date of Birth April/6/1987

Their US address: 429 Adams Street Dorchester MA 02122

Tel no: _____ Email address: _____

For all students:

I confirm that I have read and agree to the Terms & Conditions of Private accommodation.

Signed by student: _____ Date: June/23/2018

Name of fee payer (if not the student): _____

Signature of fee payer: _____ Date: June/23/2018

Independent Accommodation Student Contract

Student name: Huu Minh Pham

Academy: Senior

Start Date: Sep 15 2018

Targets to be Met:

1. Attendance 95 % or above
2. Estimated Final Grade not to fall more than one grade below Minimum Target Grade
3. Keep clear pastoral conduct at the Academy and not to enter the College 5 Stage discipline process.

These Targets will be reviewed by the Assistant Head of School once a term or more frequently if there is cause for concern, with a copy passed to the Director of Studies, Client Care Manager and Personal Advisor.

Failure to meet the terms of this contract will result in you being taken off the relevant course(s) or permission for independent accommodation being withdrawn, regardless of any financial commitments you might have made (such as rental agreements).

I, Huu Minh Pham, have read and understood the above conditions and agree to them. I understand that if my attendance falls below 95% and I do not reach my academic targets then I will move into Academy accommodation.

Student signature: ..... Date: 6/12/2018

Parent's Signature: .....Date: .....

Full address of Private Accommodation: 429 Adams Street Dorchester MA 02122

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TEMPORARY CHILDCARE AUTHORIZATION

I/We, the undersigned parent(s) of Huu Minh Pham (Your son's or daughter's name in English as it appears on his or her passport) (the "Child") hereby grant permission for the following caretaker(s) (the "Caretaker(s)") to take temporary care of the Child:

Host-Family/Caretaker Name(s): Anh Thuong Hoang

Address: 429 Adams Street Dorchester MA 02122

This granted authority shall begin on _____ (date) and shall remain effective until terminated, in writing, by the undersigned.

The above-named Caretaker(s) shall have the power to: make all decisions, execute all documents, and grant permission regarding the Child's education, including, but not limited to, school and extracurricular activities, sports, school trips, and school conferences; and regarding all health care services including emergency and non-emergency medical, dental, vision, and psychiatric care services.

By signing below, I/we acknowledged that the Caretaker(s) shall have the power to authorize medical treatment to be given to the Child by a licensed health care provider or hospital.

Natural parent(s) sign here:

Name of Natural Parent: Huu Loc Pham

Signature of Natural Parent: _____ Date: 6/22/2018

Name of Natural Parent: Hong Chau Cao

Signature of Natural Parent: _____ Date: 6/22/2018

Notary:

Name (please print): _____

Signature: _____ Date: _____

THIS FORM MUST BE NOTARIZED