

# Robert E. Lee Academy

630 Cousar Street  
Bishopville, SC 29010  
[www.releeacademy.org](http://www.releeacademy.org)

Phone: (803) 484-5532  
Fax: (803) 484-9491  
[office@releeacademy.org](mailto:office@releeacademy.org)

## ADMISSION REQUIREMENTS

Robert E. Lee Academy does not discriminate on the basis of race, color, national or ethnic origin when considering applications of prospective students or personnel. The Academy is a 501(c)(3) corporation.

The Head of School or designated administrator will interview new students with their parents. Following the receipt of student records and payment of enrollment fees, the Head of School, pending final approval by the Board of Directors, may admit a student.

The Head of School will determine placement of students at any grade level or in any course after reviewing appropriate student records and consulting with the previous school's administration.

Robert E. Lee Academy does not provide a program of study and support for students with learning problems. Our teachers work as independently as they can with each student; however, Robert E. Lee Academy reserves the right to determine when the experience is no longer a constructive educational experience for the child.

Married students, pregnant students, and/or biological parents will not be allowed to attend the Academy.

Robert E. Lee Academy reserves the right to reject any applications for admission and further reserves the right to terminate any association with students if it determines that such association is incompatible with the aims and purposes of the Academy.

Any student applying to enter Robert E. Lee Academy must be academically eligible to be promoted to the next level.

Robert E. Lee Academy will not admit a student who cannot return to his/her present school.

## ADVANCEMENT

**Grades K-4th:** Promotion will be based on the recommendation of the faculty and approval of the Head of School. A student must pass English, Reading, Math, and one other subject to be considered for promotion.

**Grades 5-7<sup>th</sup>:** Students must pass English Composition, English Literature, Math, Science, and/or Social Studies for advancement.

**Grades 8-12<sup>th</sup>:** Students must remain on grade level (appropriate credits) to remain at Robert E. Lee Academy.

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## 2011 - 2012 TUITION AND FEE SCHEDULE

***OPEN ENROLLMENT BEGINS FEBRUARY 1, 2011***

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**BUILDING FUND (Non-refundable): \$100 PER FAMILY DUE WITH ENROLLMENT FEE.**

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### ENROLLMENT FEE PER FAMILY (Non-refundable)

February 1 to February 28, 2011	\$100.00
March 1 to April 30, 2011	\$125.00
May 1 to May 31, 2011	\$150.00
June 1 to June 30, 2011	\$175.00
After June 30, 2011	\$200.00

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### TUITION – PER STUDENT

K5 – 12 <sup>th</sup> Grade	\$ 3,420.00
K4	\$ 1,920.00

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Robert E. Lee Academy provides two (2) tuition payment plans: 12 month plan and a 10 month plan.

12 Month Payment Plan (June 1 – May 1)	
K5 – 12 <sup>th</sup> Grade	\$285. Per month
K4	\$160. Per month

10 Month Payment Plan (August 1 – May 1)	
K5 – 12 <sup>th</sup> Grade	\$342. Per month
K4	\$192. Per month

**Commuter bus rider information is available in the office.**

**New students must provide a copy of their birth certificate, social security card, S.C. Certificate of Immunization, and school transcript or report card upon enrollment.**

# Robert E. Lee Academy

## Enrollment Check List for New Students

These items are due at the time of enrollment. Please use this checklist to be certain that all of your information is complete so that your child's application can be processed in a timely manner.

- \_\_\_\_\_ General Information Form
- \_\_\_\_\_ Medical Information Form
- \_\_\_\_\_ Application/Tuition Contract
- \_\_\_\_\_ Assurances Form
- \_\_\_\_\_ Records Release Form
- \_\_\_\_\_ Copy of Birth Certificate
- \_\_\_\_\_ Copy Social Security Card
- \_\_\_\_\_ S.C. Certificate of Immunizations
- \_\_\_\_\_ Last Report Card or School Records
- \_\_\_\_\_ Building Fund Fee
- \_\_\_\_\_ Enrollment Fee



**Robert E. Lee Academy**  
**630 Cousar Street Bishopville SC 29010**  
**Phone 803-484-5532 www.releeacademy.org**  
**General Information Form 2011-2012**

New Student     Returning Student

Gender:  Male     Female

**Student Information**

**Grade** \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Preferred \_\_\_\_\_

Birth Date \_\_\_\_\_ SS # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Applicant lives with: \_\_\_\_\_ Custodial Parent: \_\_\_\_\_

Applicants previous schools \_\_\_\_\_

**Parent/Guardian Information**

**Student email** \_\_\_\_\_

Marital Status: Father: D M W Single Remarried

Marital Status: Mother: D M W Single Remarried

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Email address \_\_\_\_\_

Email address \_\_\_\_\_

Home address \_\_\_\_\_

Home address \_\_\_\_\_

(If different from student)

(If different from student)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Employer \_\_\_\_\_

Employer \_\_\_\_\_

Work Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

**Financially Responsible Party**

Person responsible for tuition : \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Are there any restrictions on custody, visitation, etc., of which we should be aware? \_\_\_\_\_

If yes, please specify and attach a copy of the Court Order: \_\_\_\_\_

Siblings attending REL and current grade: \_\_\_\_\_

**All new students must provide the following copies: Birth Certificate, Social Security Card, Immunizations Certificate, Last Report Card or School Records, Signed Drug Policy, Signed Admission Requirements, Records Release, Assurances Form, Medical Form, Tuition Form and General Information Form.**

For office use only:  Date Received: _____	Building Fund Fee	General Info Form	Records Release
	Enrollment Fee	Medical Info Form	Copy SS Card
	Tuition Fee	Application/Tuition	School Records
	Bus Registration	Birth Certificate	PSAT
	Bus Enrollment	Immunization	Drug Policy
			Admission Req.

**Student Medical/Emergency Information**

Student's Name \_\_\_\_\_ Grade \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SS # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

**To Parent/Guardian:** To serve your child in case of an ACCIDENT or SUDDEN ILLNESS, it is necessary that you furnish the following information for emergency calls:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Telephone \_\_\_\_\_

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

List 2 nearby relatives or neighbors who will assume temporary care of your child if you cannot be reached:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Name \_\_\_\_\_ Telephone \_\_\_\_\_

**Insurance Verification**

Company Name \_\_\_\_\_ Policy # \_\_\_\_\_

Primary Physician \_\_\_\_\_ Telephone \_\_\_\_\_

Hospital Preference \_\_\_\_\_

List any conditions such as allergies, Epi-pen, ADHD, ear, eye, heart problems, diabetes, seizures, or chronic conditions. List any medications that you are currently taking.

\_\_\_\_\_  
\_\_\_\_\_

Please initial to allow your child to receive medication \_\_\_\_\_ Acetaminophen (Tylenol)

A student's parent /guardian may authorize the school to administer non-prescription medication. Medication must be supplied by the parent in the pharmacy labeled or drug manufacturer's original container. The authorization must be in writing and include the dosage and time the medication is to be administered.

**I, the undersigned, do hereby authorize officials of Robert E. Lee Academy to contact the persons named on this contract. In the event parents or other persons listed cannot be contacted, the school officials are hereby authorized to take whatever action deemed necessary, in their judgment, for the health of the aforesaid child. I will not hold the school financially responsible for the emergency care and /or transport for the said child. I also understand that it is my responsibility to keep all insurance and medical/emergency information current throughout the entire year.**

Student's Full Name \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

APPLICATION / TUITION CONTRACT AGREEMENT (2011-2012)  
**ROBERT E. LEE ACADEMY**  
 630 Cousar Street Bishopville, SC 29010 Phone (803-484-5532)  
[www.releeacademy.org](http://www.releeacademy.org)

The Board of Directors of Robert E. Lee Academy has final approval of all applications after receipt of school records. For current students and new students, the enrollment fee and building fund fee must accompany application. Said fees are non-refundable if the application is approved and does not apply toward tuition.

I, \_\_\_\_\_, parent, guardian, or sponsor, hereby make application for the enrollment of the student(s) listed below in Robert E. Lee Academy for the academic year beginning in August 2011 and ending in May 2012.

	Name	Grade	Tuition
First Student			
Second Student			
Third Student			
Other Students			

Note: Eleventh (11<sup>th</sup>) grade students are required to take the PSAT (\$15.00).

I hereby agree as follows:

**I. Tuition Payment Plan: Please check one (1) payment plan.**

**K5 – 12<sup>th</sup> Grade**

\$3,420.00 per student payable in installments of \$285.00 per month for twelve (12) months. First payment is due June 1, 2011 and the final payment is due May 1, 2012.

\$3,420.00 per student payable in installments of \$342.00 per month for ten (10) months. First payment is due August 1, 2011 and the final payment is due May 1, 2012.

**K4**

\$1,920.00 per student payable in installments of \$160.00 per month for twelve (12) months. First payment is due June 1, 2011 and the final payment is due May 1, 2012.

\$1,920.00 per student payable in installments of \$192.00 per month for ten (10) months. First payment is due August 1, 2011 and the final payment is due May 1, 2012.

**II. Payments are due on the 1st of each month; a late fee at a rate of 5% monthly will be assessed on the unpaid past due balance following the 10<sup>th</sup> day of the month. Returned check fee is \$25.00.**

**III. If payment is 30 days late, student(s) may not attend school until past due balances are collected.**

**IV. Student records will not be transferred to another school if there are outstanding fees payable to Robert E. Lee Academy.**

**V. An administrative fee of \$150.00 will be assessed on all students who withdraw after the opening day of school.**

( OVER )

- VI. Bills are not sent unless tuition is past due.
- VII. The following rights and prerogatives shall be vested in the Academy:
  - 1. To determine the grade and section to which the child shall be assigned.
  - 2. To refuse application based on criteria set by the Academy.
- VIII. The Academy does not provide a program of study and support for students with learning problems.
- IX. The school reserves the right to search any vehicle entering or parked on school grounds.
- X. For a student to participate in athletics and/or school extracurricular activities tuition payment must be current and the student must be academically eligible.
- XI. Occasionally, student pictures are used to add interest to stories and for recognition of achievements. My signature on this agreement grants permission to post my child's picture and first name at [www.releeacademy.org](http://www.releeacademy.org). If I do not wish to grant permission to the Academy, I will write a letter to the Academy including my child's name, grade, and stating my wishes.

I understand that in signing this Application/Tuition Contract Agreement for the upcoming school year, I and my student(s) agree to the rules and regulations of Robert E. Lee Academy as published in the current Family Handbook. It is understood that if for any reason any student is unable to meet the standards and requirements of Robert E. Lee Academy, such student shall be subject to suspension, academic probation, or dismissal, and that Robert E. Lee Academy shall be the sole judge of the sufficiency of the reason and does not have to make formal or specific charges.

I understand that this is a valid contract between myself and Robert E. Lee Academy signed \_\_\_\_\_ day of \_\_\_\_\_, 2011.

\_\_\_\_\_  
 Signature of Responsible Party                      Address                      Phone

Robert E. Lee Academy admits students of any race, color, national and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the school. It does not discriminate on the basis of race, color, national or ethnic origin in the administration of its educational or admission policies, athletic or other school administered programs.

Robert E. Lee Academy  
Assurances/General Information

As a condition of enrollment at Robert E. Lee Academy, you are asked to affirm the following conditions. Please check those items that represent TRUE statements regarding your child.

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Student's Name

Application Grade

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Transferring School

- \_\_\_\_ 1. My child is not repeating the grade applied or has not been socially promoted or placed into the grade level applied.
- \_\_\_\_ 2. My child has not been suspended from school for any period of time.
- \_\_\_\_ 3. My child has not, in the past year, been expelled or asked to withdraw to avoid expulsion from school.
- \_\_\_\_ 4. My child has not, in the past year, been suspended or expelled for reasons related to controlled substances, alcohol, or weapons.
- \_\_\_\_ 5. My child did not fail more than one subject during the past academic year.
- \_\_\_\_ 6. My child did not miss more than ten (10) days of school during the past nine school months. Note: Temporary medical conditions or family trauma excluded
- \_\_\_\_ 7. My child is not now, or in the past year, been enrolled in a Resource or other special education class.
- \_\_\_\_ 8. My child does not have an IEP (Individual Education Plan).
- \_\_\_\_ 9. My child is not or never has been pregnant, married, or a biological parent.
- \_\_\_\_ 10. My child is on medication.  
If true, please describe: \_\_\_\_\_

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I certify that the information provided above is true and correct. I understand that any misinformation regarding the above shall be cause for termination of enrollment and forfeiture of all funds paid to REL.

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Parent's Signature

Date

Robert E. Lee Academy  
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Phone: (803) 484-5532 Fax: (803) 484-9491

**Records Release Form**

To: \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Student's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

has applied for admission to Robert E. Lee Academy. Please send the following information and any other records that may assist us in evaluating this student:

1. Transcript grades and attendance records
2. Immunization (original) record
3. Copy of birth certificate, if available
4. Standardized test results
5. Withdrawal grades
6. Discipline records
7. Any other data pertinent to accurate placement

Thank you.

Sincerely,

Betsy Bramlett  
Head of Guidance

Note: Parental permission is no longer required when authorized school personnel requests records. (Family Education Rights and Privacy Act, Final Rule on Educational Records, Federal Register, June 17, 1976, Vol. 41, No. 118, Page 2463)

**Robert E. Lee Academy**  
**Policy Regarding the use of Alcohol and Illegal Drugs**

REL has no intention of intruding into the private lives of our board members, employees, or students. Our concern is that these individuals report to work/school in the mental and physical condition necessary to perform their jobs/school tasks safely and efficiently, posing no danger to themselves or to that of their fellow workers.

**Alcohol**

The use or possession of alcoholic beverages on REL property is prohibited, and is a dischargeable offense. Furthermore, no board member, employee, or student is permitted to report to work/school while under the influence of alcoholic beverages. An individual will be considered to be "Under the Influence" when consumption of any alcoholic beverage has impaired, or is likely to impair, the individual's job performance in the judgment of his or her supervisor. Any individual who is perceived to be under the influence of alcohol will be immediately removed from the job/school.

**Drugs**

The possession, sale or use of illegal drugs or the improper use of other drugs during working/school hours on REL premises is a dischargeable/expulsion offense. An individual is not permitted to work or attend class while under the influence of any drug that could adversely affect job performance/school work or could jeopardize the safety of him/her, other individuals, or the public. The procedure for handling individuals perceived to be under the influence of illegal drugs or any drug that may adversely affect job performance is the same as the procedure for having perceived to be under the influence of alcohol.

Academy administrators should not allow an individual suspected to be impaired to drive himself/herself. Transportation should be provided to the individual by calling a relative, or, if the individual is totally uncooperative, calling the local law enforcement authorities.

**Alcohol/controlled Substance Screening**

It is the policy of Robert E. Lee Academy (REL) to provide its Board, employees, and students with a safe work environment that is free from the effects of illegal drugs and alcohol.

REL believes the use of drugs and alcohol presents a danger not only to the individual who uses drugs and alcohol, but to the entire REL community. Therefore, REL is committed to taking necessary steps to eliminate drugs and alcohol from the campus.

**Testing of Current Board Members, Employees and Students**

Alcohol/drug testing of current board members, employees, and students will be performed when there is a reasonable cause to believe that an employee or student at school may be under the influence of alcohol or drugs. Determination of cause is within administration's exclusive and sole discretion, but may include the following: unusual observed behavioral pattern, declining work performance, reasonable suspicion of drugs, personal or vehicle on-the-job accidents, etc.

*Alcohol/drug testing for reasonable cause will be performed in conjunction with The Alpha Center and the individual will sign the release form (Exhibit A). Individuals refusing to cooperate in the investigation, refusing to sign the release form, or undergo the required*

*testing will be advised that they are in violation of REL policy and subject to discharge/expulsion.*

#### **Random Screening**

*Board members, employees, and students will be subject to random screening.* The method will be determined by the REL Administration in cooperation with a third party.

#### **Negative Results**

Any board member, employee or student who undergoes alcohol/drug testing for reasonable cause or as a subject of random screening with negative results will be allowed to return to his/her assigned duties.

#### **Positive Results**

Any board member or employee who undergoes alcohol/drug testing for reasonable cause or as a subject of random screening with positive results will be discharged.

Any student who undergoes alcohol/drug testing for reasonable cause or as a subject of random screening with positive results will be referred to a third party for counseling and/or treatment. Refusal to participate in counseling/treatment for drug/alcohol abuse from a recognized professional or institution will be viewed as insubordination and the individual will be expelled from REL. Documentation will be made in the individual's file. Although treatment/counseling through a third party is confidential, the Head of School and/or board chairperson will be informed as to the continuance and completion of treatment. During treatment/counseling the student will be required to undergo monthly screening (at the student's expense) monthly until the end of the school year. Should the student seek to re-enroll at REL the next academic school year they must be screened prior to the start of said school year. A positive result from any of the screenings during this period will result in expulsion for the student.

If it is deemed the student would place himself/herself or others in danger to continue in their studies the student will be granted a leave during treatment in accordance with REL's absentee policy.