



ST. MICHAEL'S POLISH SCHOOL
ST. MICHAEL THE ARCHANGEL CHURCH
20 Page Avenue Cohoes, NY 12047
Telephone (518) 237-5151
polishschool@stmichaelscohoes.org
http://www.stmichaelscohoes.org/PolishSchool/index_learn_polish.htm

§ General information.

1. Fall 2008 semester starts 09/13/2008.
2. St. Michael's School address;
St. Michael's Polish School
St. Michael the Archangel Church
20 Page Avenue Cohoes, NY 12047
Telephone (518) 237-5151
3. Fall semester enrolment will close October 4th 2008.

§ Attendance.

1. Classes are held on each Saturday and start at 9am. (Specify second class starting time if exists).
2. All students are required to arrive in classroom punctually in the beginning of class as well as from any brakes as stated by the teacher.
3. 75% of attendance is required to graduate each semester.
4. In event of excused absence students are required to complete study material and homework.
5. Scholl will follow state school schedule and any emergency closings due to weather condition. Follow mass media for closing announcements, school will also attempt to contact students in case of such events.

§ Tuition.

1. Tuition fees are paid per semester in full.
2. **Fall 2008 semester tuition in sum of \$120 should be paid no later than 9/13/2008.**
3. **Each additional student from the same family (children parents only) will receive 10% tuition discount. There will be refund in sum of \$10 for each referred student.**
4. **Tuition is subject to refund in full up to 9/20/08, 50% up to 10/04/08. No refunds after 10/04/08.**
5. Forms of payment accepted are cash (please ask for receipt if paying cash) or personal checks.
6. Tuition check should be made payable to
St. Michael's Polish School
7. Tuition payment can be send to address specified above in § General Information point 2.

§ Parent's involvement.

1. Available parents are encouraged to assist teacher during classes. Please indicate on "Student's Questionnaire Form" if you are available to help.
2. Available parents are encouraged to help during any brakes or extracurricular activities. Please indicate on "Student's Questionnaire Form" if you are available to help.

Parent/Legal Guardian/Self if over 18years old
Please print First Name Last Name

Date

Signature