



# Application for School Year 2019-2020

Serving the Chattanooga Homeschool Community for  
21 years with Excellent Curriculum, Biblical Focus,  
Healthy Accountability and Social Interaction  
Email: [hhlearning@epbfi.com](mailto:hhlearning@epbfi.com) • Phone 423.653.1333  
[www.hhlearning.com](http://www.hhlearning.com)

Office Use Only
Check# _____
Amt: _____
Date: _____
New _____
Return _____
Excel _____
Contacts _____
Letter _____

**General Information** \*\* please complete one for each child\*\*

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

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

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

Mailing Address \_\_\_\_\_

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

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_  
(This will be used for teacher communication, newsletter and billing purposes)

Cell Phone: (\_\_\_\_) \_\_\_\_\_

Grade level of your child (in the fall) \_\_\_\_\_ Age \_\_\_\_\_ Umbrella School \_\_\_\_\_

Father's occupation \_\_\_\_\_ Mother's occupation (other than CEO of the home 😊) \_\_\_\_\_

How would you like to be billed? \_\_\_\_\_ by the month \_\_\_\_\_ by the semester (5 months)

**Special Information**

Does your child have any learning deficiencies? \_\_\_\_\_ if so, please explain on a separate piece of paper  
\*\* This information will be kept **strictly confidential**...our knowledge of any area in which your child struggles will simply help us serve him/her better in the classroom.

**Scholarship Opportunities and Financial Aid**

Hilger Higher Learning seeks to provide quality education to students from families with varying financial means. In order to provide this service, we need families who are willing to sponsor/help some of these families. Hilger Higher Learning matches your gift 2 to 1! If you would like to provide scholarship money for a family and partner with HHL in this great endeavor, please initial below:

\_\_\_\_\_ Yes, I would like for you to add \$5 to my monthly bill to help a needy family.

\_\_\_\_\_ Yes, I would like to help a needy family in the specific amount of \$\_\_\_\_\_ per month.

\_\_\_\_\_ If you are a family that has a specific financial need in order to participate in our courses, please initial here. You will need to print off, fill out, and send in our **Financial Aid Application** to qualify. Please go to our Application page and click on "Scholarships" to print off the application. We will not consider your need until all of this is complete and in our office. We will communicate your scholarship in your acceptance letter or someone will contact you concerning your need.

**Payment Guidelines:** Please initial each of the following:

\_\_\_\_\_ I agree to pay 10 monthly payments **beginning in August and ending in May**, or 2 semester payments (5 months at a time), depending on the box I checked above. If you are applying for a semester only class, you agree to pay 5 monthly payments. Invoices are sent out **via email** around the 4<sup>th</sup> of each month and are due upon receipt.

\_\_\_\_\_ I understand that my invoice is **DUE UPON RECEIPT and is considered LATE if Hilger Higher Learning does not receive my monthly payment by the last day of the month.** I realize I will be charged a **\$10 late fee** if my payment is not received by the end of the month, or I have not contacted HHL to make other arrangements.

\_\_\_\_\_ I understand that all checks, cash, and money orders must be sent to Hilger Higher Learning, given to Lois in the front office or dropped in the secure "lock-box," located in the teachers' office of HHL's facility.

\_\_\_\_\_ I understand that payment is required for each class, even if my child is absent.

\_\_\_\_\_ I agree to pay a **\$25 charge** on any returned check.

\_\_\_\_\_ I agree to pay a **\$50 charge per class** if I withdraw from any class in August, before classes begin.

\_\_\_\_\_ If I withdraw within the first week of classes, I realize there will be withdrawal fees per class, plus I agree to pay for 1/2 of August's tuition.

\_\_\_\_\_ I agree to pay a **\$100 charge per class** if I withdraw at any time after the second week of class. **This INCLUDES dropping at the end of the semester**, unless the class is only one semester.

\_\_\_\_\_ I understand that all application fees and payments are non-refundable, unless a class does not form (which is rare). If your child does not get into a class because it is full, we will refund your application fees.

\_\_\_\_\_ I understand all application fees and tuition payments will be forfeited if my child is dismissed at any time during the year.

\_\_\_\_\_ I agree to pay Interest at 1% per month if my balance becomes over 60 days past due. Further, I agree to pay all legal fees, costs, and expenses associated with collecting my balance and any other efforts Hilger Higher Learning makes to enforce the terms of this agreement/contract.

**\*If you do not initial and agree to all of the above Payment Guidelines, your application will not be complete and we will NOT process it until everything has been completed.**

**Course Information:** Visit our website at [www.hhlearning.com](http://www.hhlearning.com)

Please fill out the following information for the courses you have chosen for your child. Course schedules and applications fees can be found on our website ([www.hhlearning.com](http://www.hhlearning.com)). Application fees for each class **MUST** be sent in along with this form. Of note, if you are applying after July 31, there is an extra \$10 PER CLASS application fee.

<u>Course Chosen</u>	<u>Day and Time</u>	<u>Application Fees</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Total Application Fees to be sent in with Application:** \_\_\_\_\_

**All parents and students are required to meet the following terms and conditions:**

1. At least one parent/guardian must profess faith in Jesus Christ and be in regular attendance at a local Christian church.
2. The student must conduct himself/herself in a manner worthy of the gospel of Christ.
3. The parent must be actively involved in every subject the student takes from Hilger Higher Learning.
4. The student must complete all homework on a consistent basis.
5. The student must not have excessive absences. Our teachers will let you know if this becomes a problem.
6. The student's grades must reflect his/her ability.
7. The student must leave the church premise (parking lot included) after class, unless otherwise supervised by an adult or if they have another class within the allowed 10 minute window.

If the aforementioned and future headings, as outlined in this application, along with the terms and conditions as stated, are not met and/or if biblical behavior is not kept throughout the school year and/or over the summer, we reserve the right to ask the student to discontinue classes at Hilger Higher Learning. We have a zero tolerance policy if items such as (including but not necessarily limited to) alcohol, drugs, or tobacco (this includes e-cigarettes and vaping) are possessed or consumed by a student. Under no circumstances may a weapon be brought on campus! Additionally, if a student is caught cheating on a test or quiz, he/she will be subject to dismissal from, and at the sole discretion of, Hilger Higher Learning.

**Agreement Information**

The parent/guardian of \_\_\_\_\_ (student's name) have read, understand and agree with the standards, payment guidelines, criteria, terms and conditions stated in this application. I understand that failure of the student and/or parent/guardian to comply with these standards, payment guidelines, criteria, terms and conditions may result in the student being dismissed from his/her enrollment at Hilger. By your signature, you are agreeing to and stating that you are committed to the guidelines in this application. Further, you understand that our child is attending classes at Hilger Higher Learning and Living Word Fellowship at his/her own risk. Thus, you agree to and will not hold Hilger Higher Learning, Living Word Fellowship, any employee of Hilger Higher Learning or contract laborer affiliated with Hilger Higher Learning, Inc. liable in any way. Last, by signing below, I give HHL permission to print my information in the yearly HHL directory and handbook.

Signed by parent/guardian \_\_\_\_\_ Date \_\_\_\_\_

Signed by student \_\_\_\_\_ Date \_\_\_\_\_

In order to serve all of our families to the fullest and maximize the possibility that all students receive their choice courses, we give priority course placement to returning students, students taking multiple classes, students with sibling schedules that need to be coordinated, earliest applicants and eldest applicants. Please understand that we may accept your student into a different section of a course for which you have applied, if necessary, for above-mentioned reasons.

You will be sent an acceptance letter (containing rules, regulations, textbook information, and a calendar of events) once your application has been processed and accepted. You will also receive an HHL handbook/directory at our parent meeting or during the first week of school, if you can't make it to the parent meeting. Please allow 2-3 weeks for your application to be processed. Also, please purchase books quickly once you have received an acceptance letter.

Hilger Higher Learning reserves the right to refuse any student for acceptance into our program, at Hilger Higher Learning's sole discretion. We strive to keep high standards for our students, and want the environment of our program to remain positive, encouraging and beneficial for all of the students enrolled. In order to do that, we would like for you to fill out the following questionnaire which will provide us with some important information about your family.



11. Has your child ever been suspended, expelled, or asked to withdraw from a public or private school? \_\_\_\_\_

12. Have you, your spouse or your child been disciplined by the church or asked to leave? \_\_\_\_\_

If yes to either #10, #11 and/or #12, please give the reason (use the back of this or another piece of paper), how long ago, and how you and your family dealt with the situation.

**Health and Emergency Information**

Drug and other allergies: \_\_\_\_\_ YES (list below) \_\_\_\_\_ NO

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Any prescribed medications: \_\_\_\_\_ YES (list below) \_\_\_\_\_ NO

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Past medical history and/or other pertinent information you think HHL should know:

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