

File

Registration

BTS 2024-2025

1.

Complete the Registration Form carefully. Kindly note that the school reserves the right to verify the authenticity of the presented information/document(s)
It is imperative to complete all the relevant fields. Only completed application will be processed.

Prepare the Registration File:

2.

REQUIRED DOCUMENTS	KG I – IBDP2	<ul style="list-style-type: none"> ✓ Two recent photographs of the child (passport size) ✓ A family photograph (including both parents, the child and siblings, if any). ✓ A recent Civil Extract إخراج قيد فردي (issued within the last 3 months) (For Lebanese citizens only). ✓ A recent Family Extract إخراج قيد عائلي (issued within the last 3 months) (For Lebanese citizens only). ✓ A copy of the first page of the child's passport, along with a photocopy of the page indicating the date of entry to Lebanon. (Required for students coming from abroad). ✓ A copy of the « livret de famille » (Only for French citizens). ✓ A copy of the first page of both parents' passports (Only for foreigners). ✓ Updated Vaccination Booklet. ✓ Residence Permit إقامة for the student and his parents (Only for foreigners).
	KG II – IBDP2	<ul style="list-style-type: none"> ✓ A Report Card for the current academic year (available last terms), and the 3 terms of last academic year Report Card ✓ A Certificate of termination from previous school holding the final decision of the class council. ✓ A certified photocopy of the Lebanese Brevet Diploma الشهادة المتوسطة, for students not exempted from the Lebanese Program and applying for Grade 10, 11 and 12. ✓ A Letter in Arabic from previous school holding the admission to a higher-grade level إفادة انتهاء, and the student number as it appears in the Lebanese Ministry of Education and Higher Education records. (Applicable for students coming from a school in Lebanon, and applying for KGII to IBDP2) ✓ An Official Equivalence معادلة delivered by the Commission of Equivalence at the Lebanese Ministry of Education and Higher Education. (For students coming from abroad and applying for Grade 3 to IBDP2). ✓ Exemption from the national curriculum اعفاء delivered by the Commission of Equivalence at the Lebanese Ministry of Education and Higher Education. For non-Lebanese students. <p style="text-align: center;"><u>The documents requested in blue are to be provided only after final registration.</u></p>

3.

Submit the file to the Admissions Office

4.

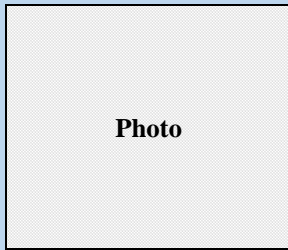
Settle the Application Fee of **100 USD** non-refundable irrespective of the school's decision.

5.

Within **ONE week** after submitting the file, an interview administration/parents/child will be scheduled. For candidates applying for Grade 1 to IBDP1, an entrance exam may be requested.

6.

Answers to families: Submitting a registration file does not involve the school in any commitment. Responses will be communicated by phone within **7 days** from the date of the interview / entrance exams. Acceptance decisions are not considered valid until settling the **contribution to the development funds**, non-refundable and must be processed within a period of **7 days** from the date the final decision has been communicated to parents.



REGISTRATION FORM INFORMATION SHEET	N^o
Grade Level : <input style="width: 100%;" type="text"/>	
Section : <input type="checkbox"/> French Section <input type="checkbox"/> English Section	

STUDENT

Student's Last Name (in CAPITAL) :

(to be filled in Arabic) الاسم والشهرة

Student's First Names :
(Underline the usual first name)

Date of Birth : / / Sex (m/f) :

Day Month Year

Place of Birth (Country & City) :

Lebanese Civil Extract or Identity Card (to be filled in English)

رقم القيد او السجل: مكان او محل القيد

Lebanese Nationality : Yes No

French Nationality : Yes No

Other Nationalitie(s) if applicable :

Schools / Daycares attended in the last 3 years	Grade Level	Year

FAMILY

	FATHER	MOTHER
Mother's Maiden Last Name		
First Names		
Dates of Birth		
Nationalities		
Attended Universities		
Diploma	<input type="checkbox"/> Bachelor <input type="checkbox"/> Master <input type="checkbox"/> PhD	<input type="checkbox"/> Bachelor <input type="checkbox"/> Master <input type="checkbox"/> PhD
Field of studies		
Occupation		
Employer		
CPF Alumni	No <input type="checkbox"/> Yes <input type="checkbox"/> Year : <input style="width: 50px;" type="text"/>	No <input type="checkbox"/> Yes <input type="checkbox"/> Year : <input style="width: 50px;" type="text"/>
E-mail Addresses		

Parental Situation Married Divorced Separated Deceased Mother Deceased Father

Specify who has custody of the children

Address : / / /

City Street Building Floor

Landline	Office Line	Mobile
<input style="width: 100%;" type="text"/>	Father: <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
<input style="width: 100%;" type="text"/>	Mother: <input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

FAMILY

Siblings

First Names	Age	School attended	Grade Level
1.			
2.			
3.			
4.			

**SPECIFIC ELEMENTS, MOTIVATIONS
which allow us to assess your child's application**

AUTHORIZATION / TERMS

I authorize CPF Montana to publish photos, videos, CDs, DVDs, works, etc. of your child taken in the school or outside, during school life activities, on various information and/or advertising media without any compensation in return.

Yes
 No

I, Mr. / Mrs. , declare that I have consulted, read and approved the **Internal Rules & Regulations** of the CPF – Montana on the School's website, and **I undertake to ensure that my child respects them.**

By filling and signing this form, I am registering my child at CPF Montana and I hold full responsibility of settling total Tuition Fees dues (between September 15 and February 15) of each school year.

The information given in this document are **highly confidential** and will be used strictly for administrative purposes. I am informed that in case of any emergency, my child will be transported to the hospital by ambulance or by one of the school personnel.

Place

Date

Parent's Signature

The validity of applying for registration is subject to: **file completion and the submission of its hard copy version** to the Admissions office.

PSYCHOMOTOR AND LANGUAGE DEVELOPMENT

TO BE FILLED - ONLY FOR **PRESCHOOL** CANDIDATES

Psychomotor Development

My child started walking at the age of:

My child is followed by a specialist:

No Yes (Assessment to be attached)

My child acquired toileting skills at the age of:

Other problems to be mentioned:

Language Development :

My child started talking at the age of:

My child stopped bottle feeding at the age of:

Hearing Problem :

No Yes

Language disorder :

No Yes

Sight disorder :

No Yes

My child is followed by a specialist

No Yes (Assessment to be attached)

Other problems to be mentioned:

**EXTERNAL MONITORING FOR
BEHAVIORAL OR LEARNING DISORDERS**

TO BE FILLED – ALL GRADE LEVELS

Has your child received external monitoring for behavioral or learning problems?

- Yes No

Indicate the external monitoring professionals involved (check all relevant options):

- Occupational therapist
 Speech Therapist
 Educational Psychologist
 Psychomotor Therapist
 Other *Details :* _____

How often does the student have external monitoring sessions?

- Weekly
 Every two weeks
 Monthly
 Other *Details :* _____

Available assessments - Please attach available assessments or reports from external monitoring professionals, if applicable.

Parents' Observations :

Do you have any observations or additional information that you think is necessary for the comprehensive understanding of your child's needs?

Appendix 3

MEDICAL FORM

TO BE FILLED – ALL GRADE LEVELS

Academic year :

Parent's Mobile Number :

Student's First & Last Name :

Date of Birth :

Blood Type :

If parents are absent, contact:

Contact 1 First & Last Name :

Tel.

Relation :

Contact 2 First & Last Name :

Tel.

Relation :

Doctor to be called in case of an accident:

First & Last Name :

Tel.

Address :

***HISTORY:**

Medical and surgical history
(Date, description):

Family History (Parents,
Siblings):

*** CURRENT SITUATION:**

Chronic diseases (Diabetes,
Asthma, etc.):

Current treatments:

Allergy (Food, Drug, etc.):

Other important information to
report:

Vaccination: Kindly attach a copy of your child's vaccination record.

INDIVIDUALIZED INTERVENTION PLAN - IIP

TO BE FILLED – ALL GRADE LEVELS

If your child has a chronic health problem (asthma, diabetes, allergies ...) please let us know. An Individualized Intervention Plan (IIP) will be set for him.

Did your child benefit from an Individualized Intervention Plan? IIP in his/her previous school?

Yes No

If yes, please tell us which one, and attach a copy of the plan.

Should your child benefit from an Individualized Intervention Plan within our school?

Yes No

The IIP is a written and confidential document which makes it possible to specify the adaptations to be made to the daily life of your child as well as the treatments to be administered.

By signing this paper, you give permission to the school to provide first aid in the event of a life-threatening emergency.

Document completed by :

First & Last Name :

Date :

Signature :

The CPF Montana declines any responsibility in case of an uncommunicated medical information..

Appendix 5

« SPÉCIALITÉS » CHOICES

TO BE FILLED – ONLY BY STUDENTS APPLYING FOR «PREMIÈRE» - **FRENCH SECTION**

IMPORTANT NOTE:

The « Spécialité Sciences Economique et Sociale » will be offered at CPF Montana through CNED (centre national d'enseignement à distance) in France. It will be the responsibility of the parents for an approximate cost of \$300 for the year in first class. Students will benefit from a tutor teacher to help them prepare for this test.

The « spécialités » offered are:

- « *Mathematics* » - Mathématiques
- « *Physics & Chemistry* » - Physique Chimie
- « *Biology* » - SVT
- « *English (language literature and foreign culture)* » - Anglais LLCE (langue littérature et culture étrangère)
- « *Economic and Social Sciences* » on CNED - SES (sciences économiques et sociales) au CNED

« Spécialités » to pursue in « Première »:

Choice 1

Choice 2

Choice 3

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Student's First & Last Name :

Date :

Student's Signature

Parent's Signature

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PARENTAL AUTHORIZATION

TO BE FILLED – ONLY FOR CANDIDATES IN MIDDLE & HIGH SCHOOL

STUDENT’S WORK PUBLICATION

Since Safety and Security is our first interest, we would like to require your permission for the publication of your child’s work on the school Website, Social Media Pages, and Newsletter; or any communication material done by the school.

We believe that it is very important to celebrate our students’ achievements.

We are aware of the potential risks when such personal information or material is published on the Internet or any global system. Therefore, kindly tick the relevant box:

- I give permission for my child’s work to appear in the school publications.
- I don’t give permission for my child’s work to appear in the school publications.

Student’s First & Last Name :

Date :

Student’s Signature

Parent’s Signature

Appendix 7

FINANCIAL SETTLEMENT

Academic Year 2024-2025

First Registration Fees – Back to school (September 2024)

Opening File Fees	100 USD
Contribution to the development fund of the school (nonrefundable)	1 500 USD

Tuition Fees 2024-2025 - Subject to change

Primary school (KG1 to Grade 5)	60,000,000 LBP
Middle school (Grade 6 to Grade 9)	60,000,000 LBP
Secondary school (Grade 10, IBDP1 and IBDP2)	60,000,000 LBP

Solidarity funds 2024-2025

Fee	4 500 USD
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Materials and Accident Insurance Fees

KGI to IBDP2	200 USD
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Re-enrollment Fee – Back to School (September 2024)

A payment notice of re-enrollment | 200 USD | will be submitted to parents in March 2024, deductible from the solidarity funds and non-refundable after withdrawal.

Indicative Payment Schedule		Réduction familiale	
1 st Installment 24-25	Sept. 15 – Sept. 30	3 rd Child	20% Discount
2 nd Installment 24-25	Nov. 15 – Nov. 30		
3 rd Installment 24-25	March 15 – March 31	4 th Child and more	50% Discount

School Transportation Fees

A paid service, available from September to June of each academic year. (School Transportation Form)

The School Transportation services are implemented by our service provider who will communicate its prices according to the real costs taking into account the Lebanese situation.

Canteen (Obligatory for Preschool Classes)

Canteen fees will be promptly added to the financial settlement for your reference, once finalized.