ST. MAARTEN ACADEMY FAVE SCHOOLS

Foundation for Academic and Vocational Education
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Parental Contract Foundation for Academic and Vocational Education (FAVE)

The undersigned,
Parent / Guardian

Address:

Phone: +1 (721)

District:

E-mail :

of student

Date of Birth (dd-mm-yyyy)

Place of Birth

requests for Admission of the student to the F.A.V.E. (St. Maarten Academy / VBC)
Parent/guardian acknowledges that the student only can be enrolled after meeting and by accepting the following conditions:

1. That all registration requirements are complete.
2. That as parent I have ensured payment of the total Parental Contribution of **USD 450 or XCG 810** has been paid in full prior to August 17, 2026. In order to ensure proper record-keeping, we kindly request that all payments are made under the student's name via **REPUBLIC BANK** using either **USD 970100407414** or **XCG 970100407515** account numbers.
3. **I understand that there is a (Non-Refundable) administration fee of USD 111 or XCG 200.** If there is a withdrawal of enrollment before August 31, 2026, then the remainder of the parental contribution of XCG 610 will be refunded. If a withdrawal of enrollment occurs after August 31, 2026, the remaining parental contribution will be pro-rated accordingly.
4. That the following documents must be uploaded or handed in:
   - Original Educational Report from previous school
   - Results of FBE examinations
   - One (1) recent Passport picture
   - Copy of Passport
   - Copy of St Maarten ID card
   - Copy of recent Original Census Registration Form (*Uittreksel Basisadministratie*)
   - Copy of Birth certificate
   - Copy of Medical Insurance
   - (For Non-Dutch Nationals) Copy of Valid Residence Permit (Immigration Office)
   - Copy / proof of payment (in the name of the student) of Parental Contribution via the Republic Bank
5. That the student will appear at school every day in complete uniform.
6. That the rules and regulation of the school will be upheld and the consequences of infractions are known and supported by me (parent / guardian and student).
7. That I will be responsible for all damage(s) caused in or at school by the student.
8. That I am aware of the following school regulations:
   * Lateness & absenteeism is not accepted or tolerated
   * Proper Uniform attire (No saggy pants)
   * Boys wearing earrings are forbidden
   * Excessive jewelry is forbidden
   * Possession of electronic devices, tablets, iPads, earpods, cellular phones etc. is forbidden
   * Possession of weapons, drugs, drug paraphernalia, vapes, firecrackers and/or alcohol is forbidden
   * The school's **Zero tolerance** approach with regard to weapons, alcohol, bullying, gambling and/or fighting.

Paid Amount of Parental Contribution when requesting Admission to FAVE: (USD / XCG)

Date (dd-mm-yyyy)

Signature Parent / Guardian