



# The *Rock* School

A *distinctively* CHRISTIAN EDUCATION

Jim McKenzie, *Headmaster* | Arica Heise, *Principal*

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## DAY STUDENT LIVING ARRANGEMENT INFORMATION

All international student living arrangements must be approved by the International Student Director, Principal, and Headmaster of The Rock School before the student can be officially enrolled. Notice of approval/denial will be sent to the parents using the contact information provided below.

### STUDENT CONTACT INFORMATION

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

WHATSAPP: \_\_\_\_\_ WECHAT: \_\_\_\_\_

SKYPE: \_\_\_\_\_ OTHER: \_\_\_\_\_

PREFERRED METHOD OF COMMUNICATION (circle one): Email Text WhatsApp WeChat Skype Other

### PARENT CONTACT INFORMATION

EMAIL: \_\_\_\_\_ PHONE: \_\_\_\_\_

WHATSAPP: \_\_\_\_\_ WECHAT: \_\_\_\_\_

SKYPE: \_\_\_\_\_ OTHER: \_\_\_\_\_

PREFERRED METHOD OF COMMUNICATION (circle one): Email Text WhatsApp WeChat Skype Other

### LOCAL CONTACT INFORMATION

NAME OF LOCAL GUARDIAN(S): \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

MAILING ADDRESS (if different): \_\_\_\_\_

RELATIONSHIP TO STUDENT: \_\_\_\_\_ EMAIL: \_\_\_\_\_

PHONE: \_\_\_\_\_ WECHAT: \_\_\_\_\_

WHATSAPP: \_\_\_\_\_ SKYPE: \_\_\_\_\_

PREFERRED METHOD OF COMMUNICATION (circle one or two): Email Call Text WeChat WhatsApp Skype



Please circle who (in addition to the student) should be contacted regarding each of the following:

1) ACADEMIC CONCERNS/UPDATES:    Parents    Local Guardian    Other\*

\*Please provide name and contact info: \_\_\_\_\_

2) BEHAVIOR CONCERNS/UPDATES:    Parents    Local Guardian    Other\*

\*Please provide name and contact info: \_\_\_\_\_

3) ACCIDENT/INJURY REPORTS:    Parents    Local Guardian    Other\*

\*Please provide name and contact info: \_\_\_\_\_

4) TUITION AND FEES PAYMENTS:    Parents    Local Guardian    Other\*

\*Please provide name and contact info: \_\_\_\_\_

5) SCHOOL INFORMATION/UPDATES:    Parents    Local Guardian    Other\*

\*Please provide name and contact info: \_\_\_\_\_

**ADDITIONAL COMMENTS REGARDING STUDENT'S LIVING ARRANGEMENTS**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Local Guardian Signature

\_\_\_\_\_  
Date