



ADMISSIONS PROCEDURE

Thank you for your interest in Odyssey School. If you have any questions about the application process, please feel free to contact Caroline Bowers, Odyssey School Administrator at (512) 472-2262.

STEP 1 – CONSULTATION

If you decide to pursue enrollment in Odyssey School for your child, please call us at (512) 472-2262 to arrange a time to meet with a member of the admissions committee, tour the school, and discuss your child's past school records and any formal testing which has been completed (a copy of the most recent evaluation should be sent in with your application). These visits are made by appointment and are scheduled for Tuesdays and Thursdays.

STEP 2 – APPLICATION

The admissions process includes a three-day student visit. This will be arranged after a prospective student's application is complete.

A completed application includes the following:

- Completed application
- \$100 non-refundable application fee
- Copy of all testing and assessments (including speech-language, neurology, educational and psychological evaluations, OT, PT, and school records)
- Release to Odyssey School of records from the applicant's present school
- Teacher recommendation forms

Once the application has been reviewed, Odyssey staff will contact you to schedule your student's three-day visit.

STEP 3 – ADMISSIONS

Following the three-day visit, the admissions committee meets to discuss each application. The admissions committee will make one of three recommendations for a student: recommend placement in Odyssey School, request additional information, or recommend alternative placement in a program other than Odyssey for the student. Parents are then notified by the admissions committee. Individualized diagnostic testing will be set up through our Testing Center (additional fee). The three minimum criteria for admission are:

- Applicant must have a documented learning disability
- Applicant must have an average-to-above-average intelligence quotient
- Applicant's enrollment will not negatively effect the school community and/or the learning experiences of other students

2017-2018 TUITION POLICIES AND FEES**Tuition 2017-2018- Core Tuition - \$17,400**

Tuition and fees for the academic year 2017-2018 are determined by the Odyssey School Board of Directors on an annual basis.

Odyssey School will accept credit card payments for full tuition and fees ONLY. There will be a 3% surcharge to cover Odyssey's cost of processing credit card payments.

A 2.5% discount is available on core tuition if paid in full by May 1, 2017 or within two weeks of acceptance for new students.

Annual Enrollment Fee, Non-refundable - \$1750 (applied toward annual tuition)

For returning students, \$1750 is due with the signed re-enrollment contract by February 15, 2017.

After this date, a \$600 late re-enrollment fee will be in effect for returning students.

For new students, the \$1750 fee is due within two weeks of acceptance notification to ensure the student's space.

Student Program Fee, Non-refundable- \$ 1250- Due February 15, 2017

The Student Program fee is for books, educational materials, student supplies and technology. Not included in this fee: individual competition/participation fees for events away from school such as PSIA, Science or History Fairs, APSA Sports.

Tuition Deferral Fee, Non-refundable- \$500- Due July 3, 2017

The Tuition Deferral Fee is required of those families paying tuition through FACTS Management.

Optional Elective Course Fees, Non-refundable - Due August 1, 2017

- Middle School- \$1850 per class for the whole school year.
- High School- \$2000 per class for the whole school year.

Payment

In order to take advantage of the 2.5% discount, full tuition payment is due by May 1, 2017. Full tuition is due by July 3, 2017 if not taking advantage of the tuition discount. If not paying tuition in full, monthly plans will be managed through FACTS Tuition Management Company. Information regarding registration in this program is available in the Odyssey School office. If paying over 12 months, you may elect either the 5th or 20th of the month as your payment date, beginning in June 2017. If electing 10 monthly payments, the first payment is due in August 2017 – and you may select either the 5th or the 20th of each month as your payment date.

Financial Assistance

Financial assistance eligibility is determined through FACTS Grant & Aid Assessment. Please refer to the enclosed sheet for the necessary instructions. You will need to provide certain information to FACTS. The Financial Assistance Committee makes all decisions on tuition reduction.

According to IRS ruling, 1.213-1, tuition fees may be deductible medical expenses. Please check with your tax consultant.

As always, please contact the Business Office with any questions or concerns regarding payment of tuition and fees. You can contact Alysa Gisser at gisser@odysseyschool.com.



ODYSSEY SCHOOL

4407 Red River Austin, TX 78751
(512) 472-2262 (512) 236-9385 fax
www.odysseyschool.com

APPLICATION FOR ADMISSION

STUDENT NAME _____

CURRENT GRADE _____

DATE OF APPLICATION _____

**PLEASE ATTACH
A RECENT PHOTO
OF STUDENT**

FOR OFFICE USE ONLY

D/T _____

P _____



APPLICATION FOR ADMISSION

THIS APPLICATION IS FOR: IMMEDIATE PLACEMENT PLACEMENT AT THE START OF THE NEXT SCHOOL YEAR

APPLICANT INFORMATION

First Name Middle Name Last Name Preferred Name

Home Address City State Zip Code

Date of Birth Place of Birth Current Age Male Female

PARENTS OR GUARDIANS WITH WHOM THE APPLICANT LIVES

Parent/Guardian #1 _____
First Name Last Name Relationship to Applicant

Home Phone Cell Phone Email Address

Employer Position Work Phone

Parent/Guardian #2 _____
First Name Last Name Relationship to Applicant

Home Phone Cell Phone Email Address

Employer Position Work Phone

Please check if applicable: Parents separated Father deceased Father remarried
 Parents divorced Mother deceased Mother remarried

If parents are separated or divorced, who has legal custody? (Documentation required) _____

Who has physical custody and what are the arrangements? (Documentation required) _____

PARENTS OR GUARDIANS WITH WHOM THE APPLICANT DOES NOT LIVE

Parent/Guardian #1 _____
First Name Last Name Relationship to Applicant

Home Phone Cell Phone Email Address

Employer Position Work Phone

Parent/Guardian #2 _____
First Name Last Name Relationship to Applicant

Home Phone Cell Phone Email Address

Employer Position Work Phone

FAMILY BACKGROUND

Are there any languages other than English used in the home? If so, please specify _____

Are there any other siblings in the home? Please list both names and ages:

Brothers

Sisters

Others residing in the home _____

Do/Did relatives of the applicant have significant problems in school? If so, please explain _____

Please give the names, addresses and telephone numbers of two people to contact in case of emergency if the parents cannot be reached.

Name	Relationship to Applicant	City/State	Phone
_____	_____	_____	_____
_____	_____	_____	_____

Name	Relationship to Applicant	City/State	Phone
_____	_____	_____	_____

LEARNING CHALLENGES

Diagnosis of applicant's learning difference or attention deficit disorder (documentation required) _____

Applicant's physician or pediatrician _____

Does the applicant take prescribed medication for attention/focus/activity/mood level? If yes, please specify the name of the medication and times administered:

Other professionals who have worked or are working with applicant (speech/language pathologist, psychologists, counselors, ect.) Please be thorough, and use additional pages if necessary.

Name	Relationship to Applicant	City/State	Phone
_____	_____	_____	_____

Name	Relationship to Applicant	City/State	Phone
_____	_____	_____	_____

Name	Relationship to Applicant	City/State	Phone
_____	_____	_____	_____

LEARNING CHALLENGES cont.

Has the applicant had any history of experimentation with drugs or alcohol? If yes, please explain. _____

Does the applicant have any condition which might interfere with their full participation in all aspects of Odyssey School (including but not limited to classwork, field trips, physical activities, ect.)? If so, please explain.

ACADEMIC HISTORY

Applicant’s current school and address _____

Present teachers _____

Other schools previously attended:

School

City/State

Grade(s)

Reason for Leaving

Grade the applicant is in at time of application _____

Has the applicant repeated a grade? If so, which one _____

Has the applicant skipped a grade? If so, which one _____

Please describe any tutoring the applicant has had, including dates. _____

When did you first become aware of a problem in school? _____

Please state your expectations of Odyssey School in its work with your student _____

LEARNING PROFILE

Please list the areas of the applicant’s talent or interest. _____

The applicant is happiest when _____

The applicant is resistant or unhappy when _____

Please describe the applicant’s strengths and learning needs in the following areas:

Phonics _____

Reading comprehension _____

Spelling _____

Handwriting _____

Written expression (ability to express thoughts in writing) _____

Memory for math facts (addition, multiplication, ect) _____

Understand of math concepts (such as knowing *how* to add or multiply) _____

Solving word problems _____

Science _____

Social Studies/History _____

The involvement and support of each student’s family is an integral part of Odyssey School and is critical to our success. Odyssey School is committed to working as a team consisting of the student, teachers and parents to provide every opportunity for success. Parents will also be asked to contribute time and talent at various times during the school year. Please make sure you understand the commitment we ask of parents prior to submitting this application.

Parent Signature

Date

Parent Signature

Date

Odyssey School admits qualified students and does not discriminate on the basis of race, color, religion, sex, national origin, sexual orientation, or disability in the administration of its education program, admissions, financial aid, athletics or other school policies. All students are afforded the rights, privileges, programs and activities generally accorded or made available to Odyssey School students.



STUDENT RECORDS RELEASE AUTHORIZATION

I hereby grant Odyssey School permission to request records pertaining to my child,

_____ from his/her previous school or professionals who have worked or working with him/her. Records pertaining to the following should be included:

- Academic
- Attendance
- Behavior
- 504
- Special Education

Name and address of previous school or other professional:

Name Phone Fax

Address City, State Zip

Parent Signature Name (please print)

Date

Please mail or fax this form along with all student records to:
Odyssey School Phone: (512) 472-2262
4407 Red River FAX (512) 236-9385
Austin, Texas 78751



Parents: Please provide your child's current/past schools with this form and three copies of the teacher recommendation forms.

I hereby grant Odyssey School permission to request information and records pertaining to my child,
_____ from his/her previous school or other professionals who have worked or are working with
him/her.

I further request that the school principal and two other teachers from the current or previous school year submit the following
recommendation to Odyssey School. I waive my right of access to this recommendation and understand that it will not become part
of his/her permanent record. **(Parents, please forward this form to the appropriate persons).**

Parent/Guardian Name (Please print)

Parent/Guardian Signature

Date

Teacher's please fill out the recommendation form and mail or fax it to:

Odyssey School
4407 Red River
Austin, TX 78751
Ph. (512) 472-2262
Fax (512) 236-9385

Name and address of School or Institution: _____

Phone Number: _____

Name of Evaluator: (Please Print)

Signature of Evaluator

Date

Relationship to student

Teacher Recommendation Form

Name of person completing form: _____

How long and in what capacity have you known the applicant?:

Has the child named on the reverse of this form had discipline problems (either major or minor)?

Yes **No** *(Please circle appropriate answer). If yes, please explain below:*

To your knowledge, has this student had any violations of the law?	Yes	No
Has this student been known to use drugs or alcohol?	Yes	No
Has this student been suspended?	Yes	No
Is this student allowed to return to your school?	Yes	No
Has this student ever left class or the school without permission?	Yes	No

Please rank the student in the following areas – Circle the correct answer

	Seldom		Most Times		Always
This student is cooperative	1	2	3	4	5
This student is respectful.	1	2	3	4	5
This student is in compliance with school rules.	1	2	3	4	5
This student is in good standing (regarding discipline)	1	2	3	4	5
This student has good peer relationships.	1	2	3	4	5
The parents are supportive of the school and its policies.	1	2	3	4	5

Is there any additional information you would like share with the admissions committee? *(use additional page if needed)*

Please mark the appropriate box:

- Strongly recommend
- Recommend
- Recommend with reservations
- Do Not Recommend

Students who apply must meet these criteria first:

- The student must have a documented learning disability.
- The student must have an average to above-average IQ.
- The student’s enrollment will have a positive or neutral effect on the school community and learning experiences of other students, rather than a negative one.

WHO WE SERVE: Odyssey School can best help students with a variety of learning disabilities, including:

·ADD/ADHD	·Dyslexia	·Dysgraphia
·Processing disorders	·Executive functioning issues	·Low academic self-confidence

ODYSSEY SCHOOL IS NOT EQUIPPED TO HELP STUDENTS WHO HAVE:

·Limited intellectual functioning	·History of violence or aggression	·Emotional disturbance or mood disorder
·Severe autism	·Drug or alcohol problems	·Behavioral or emotional issues



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APPLICATION CHECKLIST

- Application

- Application fee (\$100)

- Three teacher recommendation forms

- School records

- Release of records from the applicant's current school

- Testing; includes neurological, speech/language, educational, psychological, physical and occupational therapy