



The Rock Academy

6641 W SR 46 / Sanford, FL 32771

FCCPSA & NCPSA Accredited

Established 2009

FLDOE #1700

5th and 6th Grade Schedule 23-24

Student Name: _____

	Monday	Tuesday	Wednesday	Thursday	Friday
8:30	Language Arts I	Guided Study A <i>Required for Scholarship Students 8:30am-12:30pm</i>	Math 7/6 or Creation History	Guided Study A	Middle School Art I Guided Study A
10:30	Math 6/5 or Study Hall	Guided Study A	Renaissance History	Guided Study A Pick up	Music/Theater Or Guided Study A
12:30	LUNCH	LUNCH/Pick Up	LUNCH	LUNCH/Pick Up	LUNCH/Pick Up
1:00	Physical Ed	Guided Study B <i>Students who need to stay from 8:30am-3:00pm</i>	Astronomy	Guided Study B	Study Hall
3:00	Pick up	Pick up	Pick up	Pick up	Pick up

Financial Information 2023/2024

Enrollment Fee	\$150 per student	<input type="checkbox"/>
Individual Classes	\$800 per class Number of Classes _____	<input type="checkbox"/>
6 Classes (Full Time) <i>*All Scholarship students MUST do Full Time</i>	\$4,800	<input type="checkbox"/>
Guided Study A (Full Time) <i>*All Scholarship students MUST do Guided Study A</i>	\$50 per week (\$1,800)	<input type="checkbox"/>
Guided Study B <i>*For students who need to stay until 8:30am to 3:00pm</i>	\$100 per week (\$3,600)	<input type="checkbox"/>
Study Hall <i>*All scholarship students get 1 study hall (if needed)</i>	\$10/week per study hall (\$375) Number of Study Halls _____	<input type="checkbox"/>

TOTAL TUITION = \$ _____

By signing below, I agree to pay this amount to The Rock Academy either fully or in payments set up on my FACTS account. This amount is NON-REFUNDABLE and will be billed whether my child completes the courses or not. ***I understand that if my child is on scholarship, they will cover 6 Classes, Guided Study A and 1 Study Hall. I am responsible for anything over and above this. If the scholarship does not pay or does not cover this amount, I am responsible for amount owed.*

Print Name: _____ Sign Name: _____