



QUALITY SCHOOLS INTERNATIONAL

QSI International School of Ljubljana

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QSI LJUBLJANA SCHOLARSHIP ACCEPTANCE AGREEMENT

Dear parent of _____

I am pleased to inform you that QSI Ljubljana’s Advisory Board has decided to offer a scholarship to your _____ The amount of the scholarship is:

ITEM	AMOUNT
Scholarship Award	
Capital Fee Waived	
Total Scholarship	
Based on the above award, the fees for <i>student Name</i> for the 2017/2018 school year will be	

Please read the information below, sign the form and return to the school office.

- I agree to pay any amount I currently owe for the 2016/2017 school year. Scholarship **will not be** effective until all past due fees are paid.
- I agree to pay the fees indicated above for the 2017/2018 school year in a timely manner.
- My child will be a model for others to follow. Homework and other assignments will be completed and handed in on time.
- My child will not be given any “N’S” in any of the seven Success Orientations.
- As a parent and scholarship recipient, you are **REQUIRED** to help the school in some manner during the year.

✂ _____

I understand the amount of the scholarship award and agree to the conditions above. I also understand that if the above conditions are not followed, **the scholarship will be revoked and the full fees will be due.** Please indicate below if your child will or will not attend QSI in 2017/2018.

My child **WILL / WILL NOT** attend QSI for the 2017/2018 SCHOOL YEAR.

Parent Name

Parent Signature

Date