博愛中文學校

BERRYESSA CHINESE SCHOOL

請必須填寫有 * 的部份,資料不全,恕不受理。Area with * are required.



P.O. BOX 32988, San Jose, CA 95152-2988 Voice Mail: (408) 5200-BCS Email: registration@bcs-usa.org

www.bcs-usa.org

跳級或插班考試表格

Placement Test Form

跳級或插班考試規則

博愛跳級的學生或校外插班生都必須接受考試測驗。學生所要跳或要插班的年級不可以超越其日校就讀的年級。請提供日校的班級文件。

特別條例: 博愛的學生若需要參加跳級考試, 必須要有博愛現任班級教師的推薦和博愛教務組的同意。 跳級或插班考試必須繳交\$20 手續費(不退費)。如果學生錯過了考試日期, 不允許補考。

網上付款加收 5%手續費。

Placement Test Policy

Non BCS students/BCS student are required to take an oral and written examination when transferring from a lower grade level to a higher grade level, or from one language program to another. Students may not request to skip a grade level that is higher than their current day school level. You must provide a day school grade document.

Exceptions: BCS student must have a recommendation from their current BCS teacher as well as the approval of the BCS Academic Committee.

There is a non-refundable \$20 fee for each placement test application. No make-up exam will be given if the student misses the test. (5% processing fee will be applied to online payments)

學生資科 Student Information

				OFFICE	USE ONLY
中文姓名 Chinese name	* 英文姓名 English na	ime 學生	上學號 Student ID	CK#	\$
*原語文班級 Current Language Class		吾文班級 Intended Language Class/Grade		Staff Init.	 Date
*日校班級 Day School Grade (Placement Test Only) Only skip one grade level		考試日期 Place	ement Test Date	Class	Class ID#
 家長電子郵件 Parent's email address		- * * * * * * * * * * * * * * * * * * *			
*家長簽名 Parent's signature			Date		

OFFICE USE ONLY				
Received By	Date:			
教務組批准 Academic Committee	Date:			
註冊組批准 Registration	Date:			
教務副校長批准 VP of Instruction	Date:			