



2026-2027 ETP Initial Application Packet

P: 352-787-8855
F: 352-805-4447

2201 Spring Lake Road
Fruitland Park, FL 34731

www.htepiscopalschool.org
office@htepiscopalschool.org



Thank you for considering our program to meet your student's independence and career readiness needs. Please review the following checklist and forms. We appreciate as much information as you can provide to help us best assess how we can support your student's success.

If you have any questions, please contact the office via phone or email:

office@htepiscopalschool.org

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Requested Documentation Checklist

Please provide copies of all the following documents, when available and applicable:

- All Included Forms Completed
- Transcripts
- Health Records, Including Immunization Record
- Current IEP or 504 Plan
- ESE Assessments (most recent, or evaluation report from Initial IEP eligibility)
- State Testing Results
- Achievement Testing Results
- Discipline Records
- Attendance Records
- Copy of Birth Certificate
- Copy of Custody Agreement, if applicable

How did you hear about us? _____



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Student Learning Considerations

- ADHD**
- Autism**
- ODD**
- Anxiety (list triggers):** _____

- Dyslexia, Dyscalculia, and/or Dysgraphia**
- Speech / Language Disorder**
- Other Learning-Affecting Conditions:** _____

IEP or 504 Information:

Please provide a copy of most recent IEP or 504 with application.

Primary Exceptionality on IEP or 504: _____

Date of most recent IEP or 504: _____

County & State writing most recent IEP or 504: _____

Signature of Parent/Legal Guardian

Date



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Career and Skill Interest Questionnaire

Name: _____

Date: _____

Our goal with this program is to support independence and developing livelihood skills. Please carefully consider the following questions. The program is designed to be flexible! If a particular course of study is not working out, we can pivot and try something new!

What skills would you like to learn or improve for home living independence?

What skills would you like to learn or improve for the workplace?

What career fields are you currently interested in (be as specific or vague as you want!)?

What job experience do you currently have?

Check any of the following activities you enjoy:

Talking to people

Working on the computer (word documents, spreadsheets, emails, etc.)

Organizing stuff

Doing math

Fixing or working with mechanics

Building or repairing furniture/projects/structures

Knowing and sharing statistics and information (could be sports, environment, politics – anything!)

Working with animals

Being physically active (manual labor, high-movement tasks, working out, etc.)

Telling stories

Other (please describe): _____



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Student Information Questionnaire

1. Student Strengths (describe your student's social and educational strengths):

2. Student Behavior (describe behavior at home, what behavior do you feel interferes with academic performance):

3. Social Interaction (describe the student's interaction with parents, siblings, teachers, and peers):

4. Please describe your concerns for your students (including future goals):



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5. Please describe areas that you feel your student needs assistance with:

6. Describe any concerns that your student may have about school, their career, or life plans:

7. Is there anything else you want us to know about your student?



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Student & Family Information

Student Name: _____ **DOB:** _____

Student Address: _____ **Gender:** _____

_____ **26-27 Grade:** _____

Sibling Names and Ages (if any): _____

Date/Place of Baptism and confirmation if applicable: _____

Does this student have a shared custody arrangement? _____ **Yes** _____ **No**

If yes, please provide copy of court ordered custody agreement.

Who does the student primarily reside with? _____

Parent / Guardian #1: _____ **Address:** _____

Phone Number: _____

Email: _____

Guardianship Type: _____
(i.e., Parent, Step-Parent, Primary, Visitation, No Parental Rights, etc.)

Does this guardian have school-related financial responsibility? _____ **Percentage?** _____

Parent / Guardian #2: _____ **Address:** _____

Phone Number: _____

Email: _____

Guardianship Type: _____
(i.e., Parent, Step-Parent, Primary, Visitation, No Parental Rights, etc.)

Does this guardian have school-related financial responsibility? _____ **Percentage?** _____



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Tuition & Fees Summary

The following is a summary of the Tuition & Fees policy and the Scholarship & Financial Assistance policy from the Family Handbook. Please refer to the Handbook for more details.

Scholarship

HTES-ETP accepts Florida's Family Empowerment Scholarship through Step Up for Students. Our students may use either the Private School Scholarship or the Unique Abilities Scholarship to help cover tuition. For more information about scholarship qualifications and application, please visit:

www.stepupforstudents.org/scholarships/

StepUp Scholarship Information (if available)

Please login to your EMA portal and provide the following information to the best of your ability. This will be used to calculate total guardian tuition responsibility.

Scholarship Type:

- Unique Abilities (Recommended, FES-UA)**
- School Choice (FES-EO)**
- Other:** _____

Award ID: _____ **Award Amount (optional):** _____

HTES-ETP Needs-Based Financial Assistance

We recognize that not all students will receive full funding from Step Up, and for some students the remaining balance may create undue hardship. Generous members of the Holy Trinity community have created a needs-based assistance fund to further assist in these cases. There is a formal application process following federal guidelines for financial aid, and each application is evaluated first-come-first-serve on an individual basis. This assistance is intended to mitigate true hardship and is not available for general application. If you are in need and believe you will qualify based on federal income guidelines, please contact the Head of School for an application.

To receive tuition assistance, parents/guardians must complete the formal application for financial aid with supporting documentation. A most recent tax return must be provided to substantiate financial need. All parents must make a minimum payment of 5% of whichever is less: the annual cost of tuition and fees, or their remaining balance due after all state scholarships have been credited to their account. The school board may make exceptions due to unusual hardship or multiple students in a family on a case-by-case basis when presented with a petition from the Head of School.

Tuition & Fees

A parent or guardian must be designated as the Responsible Party for the full tuition (meaning tuition and all fees), regardless of assumed scholarship funding. However, your student's tuition payment plan will be calculated based on total responsibility minus awarded scholarship funding. Tuition, fees, and payment plan options are listed below.



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Holy Trinity Episcopal School Tuition	\$ 10,500
Student Fee	+ \$ 700
FACTS Registration Fee – due in full at enrollment	+ \$ 55
Total Guardian Financial Responsibility	\$ 11,255
Payment Plan Options:	
1 Full-Sum Payment (due date variable)	\$ full total
2 equal payments due on the 1st of September and the 1st of March	\$ total / 2
10 equal payments due on the 1st of each month, September to May	\$ total / 10

Split Households

If there is any specific division of financial responsibility, whether legally established or good-faith agreement between parents, please notify the school office. A copy of the custody agreement (if relevant), including any specified financial arrangements will be requested for documentation purposes. Each responsible party will be given an independent billing account with the appropriate percentage of responsibility assigned.

Payment Policy

Every student account is required to enroll in an auto-payment plan in the FACTS Family Portal. HTES-ETP processes and tracks all payments via FACTS Management. Parents will be able to view their payment record, outstanding balance, and upcoming payments in the portal. Parents will also be able to make advance and incidental payments as desired.

Timely payments in compliance with the selected payment plan are the responsibility of the below specified guardian. This responsibility includes the timely guardian approval of quarterly scholarship disbursements in the Step Up EMA portal.

Returned or “bounced” payments and delinquent accounts may be subject to fees and notices per the FACTS billing agreement. Please note, delinquent accounts may result in delayed or denied re-enrollment applications. For senior students, delinquent accounts may result in withheld diplomas until the balance is paid in full. For further details, please see the Financial Responsibility Policy in the Family Handbook.

Uniforms

Students are expected to practice job-focused personal presentation: good hygiene, nice functional shoes, and business casual attire (think khaki’s and a button-up or a nice blouse). If your student has a job, they are welcome to wear their job uniform to the program.



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Acknowledgement of Policies and Responsibilities

I, the undersigned, understand and agree to the policies, terms, and conditions described above. I further understand and agree to be the Financially Responsible Guardian, liable for all tuition and fees as assessed by Holy Trinity Episcopal School Extended Transition Program.

Responsible Party Name (print)

Relationship to Student

Address

Phone Number

City State Zip

Email Address

Signature

Date