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## **Special Payment Plan (SPP) Request Form**

I hereby request a Special Payment Plan allowing individual self-payers to pay Tuition & Fees in four (4) installments with specified due dates during the academic year.

I understand that the Administrative Fee of CZK 39,500 per family will be added to the first installment and must be paid for this Plan to come into effect. I also understand that all one-off Fees (Administrative Fee, Newcomer Fee and Capital Assessment Fee) will be assessed as part of the first installment of my SPP.

Finally, in requesting this SPP, I acknowledge that it does not supersede or replace any payment or other terms or conditions established in the Enrollment Agreement I have signed with the School.

Academic Year:	
Parent's Name:	
Parent's Email, Telephone:	
Student's Name, Grade:	
Student's Name, Grade:	
Student's Name, Grade:	
Student's Name, Grade:	

Date:

Signature:

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Accredited by the New England Association of Schools & Colleges and the Council of International Schools

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