

"De Soto Summer School"

Summer School 2024 (June 3 - June 28, 2024)

High School ENROLLMENT FORM

Students entering 9th-12th grade in August 2024

STUDENT INFORMATION – (PLEASE PRINT)

Please use the student's legal name and enter the student's correct date of birth.

LAST FIRST MIDDLE

____ Male ____ Female Date of Birth ____ / ____ / ____ Race _____
Month Day Year White, Black, Asian, Hispanic, Amer. Indian, Native Hawaiian

School Attended and grade completed May 2024 _____ / _____
Name of School Grade Completed

Home Address _____

City _____ State _____ Zip _____ Email _____

Home # _____ Cell # _____ Work # _____

Parent/Guardian _____ Relationship _____

Home # _____ Cell # _____ Work # _____

PLEASE CHECK THE GRADE LEVEL THE STUDENT WILL BE ATTENDING IN AUGUST 2024:

_____ 9 _____ 10 _____ 11 _____ 12

- Space is limited for some courses. Low enrollment may cause a course to be canceled.
- Priority for courses will be based on student needs determined by high school staff.
- Students will **NOT** receive credit if absent for more than 2 sessions.
- Core Remediation classes are for students interested in recovering credits or needing a deeper explanation of concepts.
- Students cannot select more than 2 courses below.

X	Core Remediation: ½ credit/class	X	Additional Course Offerings: ½ credit/class
	Algebra IB – for any student who passed Algebra I in the first semester but failed the second semester <u>or</u> failed Algebra I first semester but passed Algebra IA second semester and would like to make up credit to advance to Integrated II next year.		Drivers Education - Must be 15 years old, 1st day of class with a permit. **Limited space; first come, first serve.
			Computer Applications (9-12) (Virtual)
			PE (9-12) (On Campus Only)
	Math Lab 1 – for any student in PreAlgebra or Intro to Algebra who needs to make up additional math credits.		Health (9-12) (Virtual)
			Personal Finance (10-12) (Virtual)
			History of Rock & Roll (9-12) (Virtual)
	Math Lab 2 – for any student who has already passed both semesters of Algebra I but needs to make up additional math credit		Work Study (9-12) (On-Campus) - Must be 14 and have workers permit. Worker's permits and tax paperwork can be obtained in the high School counseling center. Students earn \$11.15/hour. This is a non-credit course. This will definitely be an AM course running from 8:00 - 11:00am. If we have enough interested students, we will also open up an afternoon session.
	World History (10-12)		
	American History (10-12)		
	American Government (10-12)		
	9 & 10 English (10-12)		
	11 & 12 English (12)		
	Physics First (10-12)		
	Biology (10-12)		
	General Chemistry (10-12)		

PLEASE RETURN COMPLETED FORM TO MAIN OFFICE IN THE HIGH SCHOOL

Health Form

Student's Legal Name

(PLEASE PRINT) _____
LAST FIRST MIDDLE

Date of Birth _____

Other Family Members Attending Summer School _____

Guardian (s) _____

Home Phone _____ Work Phone _____ Cell _____

Emergency Contact _____ Relation _____ Home # _____

Work # _____ Cell # _____

Alternative Emergency Contact _____ Relation _____ Home # _____

Work # _____ Cell # _____

Does your child have an I.E.P.? Yes No

If yes, please specify the program and teacher name _____

Health Problems or Concerns Yes No

If yes, please describe in the space below any vision or hearing difficulties, diabetes, asthma, seizure disorder, allergies, activity restrictions, orthopedic problems, mental/health concerns, or special health procedures that will need to be carried out during regular Summer Adventure hours. _____

Is your child currently taking medication at home or school? Yes No Medication _____

Is your child allergic to anything? Yes No If yes, please identify _____

Will your child need medication during Summer School hours? Yes No

(If yes, the child must have a medical form on site.)

Name and phone number of student's physician (s) _____

Hospital Preference _____

In case of an accident or serious illness, I request school personnel to contact me, alternate authorized persons, or the named physician. If it is impossible to contact me, authorized persons, or the physicians, the school personnel may make emergency arrangements as necessary to care for my child.

Parent/Guardian Signature _____ Date _____

TRANSPORTATION - (provided to students who reside in De Soto District only)

Bus Transportation

Will your child be riding the bus? Yes No

Transportation Address _____

Sunrise Optional Bus Stops:

Agape Church (Athena) SMCI (Vineland) Summer Set Back Gate (Vineland)

Other Transportation

Walk Car Other _____