



# 2018 Middle School Intervention/Promotional Summer School Charter School - Pre-Qualification Form

**This is a Pre-Qualification Form.** Your child has been recommended as a possible candidate to participate in the 2018 Intervention/Promotion Program for 6-8 grade students.

- Program:** Middle School Intervention/Promotion
- Eligibility:** District Managed SCS Middle School students in grades **6 – 8** are eligible for this program if they have failed **one or two** course subjects (**Language Arts, Math, Science, or Social Studies**)
- Sites:** Craigmont MS, Hamilton MS, Havenview MS, Hickory Ridge MS, Kate Bond MS
- Program Dates:** **June 6 – July 3, 2018**
- Program Hours:** 7:30 AM – 1:30 PM
- Courses Offered:** Language Arts, Math, Science, and Social Studies
- Cost:** Free
- Requirements:** Students are required to follow the Summer School policies regarding attendance, code of conduct, and dress code. Parents must agree to these requirements for students to participate in the program.

**REGISTRATION:**

Registration will be held at the Summer School Sites.

Dates: **Monday June 4, 2018 8:30 AM – 2:30 PM SCS and Charter Schools**

Parents will need to bring a copy of this **form** and a copy of the student’s **report card** to registration on one of the dates listed above. These forms will not be returned, so please have a copy available that you can leave with the Summer Site. **Space is limited and it will be a first come, first serve basis.** Please make sure you allow time when registering your child.

**IMPORTANT:** If the parent is providing transportation, then please select one of the following summer site locations. If you would like the student to ride the bus, a site will be assigned for your child based on bus transportation. School Counselors will be given a list of the assigned locations.

Select Site:  Craigmont MS  Hamilton MS  Havenview MS  Hickory Ridge MS  Kate Bond MS

**Grades 6-8** – List the final grades for students in 6-8 on Report Card - LA  Math  Science  Social Studies

Student’s Name \_\_\_\_\_ Student ID# \_\_\_\_\_

Student’s Grade Level \_\_\_\_\_ Student Date of Birth \_\_\_\_\_ Alt phone # \_\_\_\_\_

Current School \_\_\_\_\_ School phone # \_\_\_\_\_

Parent (s) or Guardian (s) Name \_\_\_\_\_ Home Phone # \_\_\_\_\_

Does the student have a 504? (Y) (N) What is the 504 for? \_\_\_\_\_

Does the student have an IEP? (Y) (N) Schools will need to include a copy of the IEP

Does the student use medical equipment? (Y) (N)

If yes, list equipment: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

School Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_