



**NRESC Summer School at Wayne
Registration Form (1st copy)**

1. Name _____ M F
Last First
2. Address _____
#/Street Town/State Zip
3. Telephone _____ / _____
Home Emergency
4. Sending School _____
5. Telephone of School _____
6. School Address _____
7. Last Grade completed: 8 9 10 11 12
8. Do you receive supplemental help during the regular school year? Please circle: ESL HSPA Tutor Other _____
9. Does the student have any additional needs for specialized or support services? YES NO
If yes, IEP/504 must be attached to this form to register.

10. Course Request:
- Subject 1: _____ Grade Level _____
Check one:
 Remedial (failed course)
 Accelerated
 Enrichment
- Subject 2: _____ Grade Level _____
Check one:
 Remedial (failed course)
 Accelerated
 Enrichment
11. Authorization of Sending School: Credit may not be awarded without the approval of the sending school. Not needed for Enrichment Courses
- Name of Principal/Guidance Counselor: _____
- School Official's Authorization Signature: _____

Office Use Only

Tuition Payment \$ _____ + \$ _____ = \$ _____
Cost of Course(s) Registration Fee Total

Amount Received \$ _____ Date _____ Balance Due _____ Paid in Full _____

Method of Payment: Cash Bank Check Money Order Visa MasterCard Discover Initials _____



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NRESC Summer School at Wayne: Health History and Emergency Information 2017

Please complete this form and submit it at the time of Summer School registration for your son or daughter. This information is necessary to assist the school nurse in caring for your son or daughter and will be considered confidential. It is the policy of this school to contact the parent/guardian or an individual you designate to come to the school for the student who is ill.

Date of Registration _____ Sending School _____ District _____

Student's Name _____ Age _____ Parents' Phone _____

Address _____

Parents'/Guardians' Names and Emergency Numbers:

Mother's Name: _____ Address: _____ Phone: _____

Father's Name: _____ Address: _____ Phone: _____

Please list two emergency contacts who will assume temporary care of your child if you cannot be reached.

Name: _____ Address: _____ Phone: _____ Relation: _____

Name: _____ Address: _____ Phone: _____ Relation: _____

Health History: What has been the general health of your child during this past year? _____

Physician's Name: _____ Address: _____ Phone: _____

Is your child on medication? Y/N Name: _____ Dosage: _____

Health Problems/Allergies: _____

Additional Comments/Concerns: _____

Does your child carry school insurance? Y/N Company: _____

Signature of Parent/Guardian: _____ **Date:** _____



Summary of Rules for Summer School Conduct

Students are to exhibit courteous behavior at all times. Profanity will not be tolerated. In accordance with Public Law 1989, Chapter 96; **NO SMOKING IS ALLOWED** in school or the school grounds. All smokers will be reported to the health department. The student will then be removed from school.

All rules of conduct must be obeyed. Students who fail to comply with the regulations of the NRESC Summer School at Wayne Valley will be expelled and no credit will be granted. Tuition fees of any students expelled from summer school for disciplinary reasons will not be refunded.

THE FOLLOWING RULES WILL BE STRICTLY ENFORCED:

- No drugs or alcohol are permitted in the building or on school grounds.
- No smoking in the building or on school grounds.
- Cell phones, iPods and all other electronic equipment **MUST** be turned off before entering school.
- Fighting will result in immediate dismissal.
- The NRESC DRESS CODE will be enforced.
 - Tank tops, strapless tops, and short shorts are not acceptable. Shorts must be at the knees.
 - Hats, bandanas, and offensive or disruptive items are not permitted.
 - Flip flops are not permitted. Sandals must have a strap around the ankle.
- Students will be held responsible for reimbursement to the Wayne Board of Education for any damaged or unreturned texts or equipment.

ATTENDANCE

Since summer school attendance is mandated by the State, students are not permitted any absences. **THERE ARE NO EXCUSED ABSENCES OR LATES. IF A STUDENT SEEKS FULL CREDIT FOR A COURSE, EVERY ABSENCE MUST BE MADE UP WITHIN 2 DAYS AT THE TUTORING FEE OF \$30 PER HOUR. THIS FEE APPLIES TO LATES AS WELL AS ABSENCES.**

I HAVE READ AND WILL COMPLY WITH THE ABOVE REGULATIONS

Parent/Guardian's Signature: _____ Student's Signature: _____