

NRESC Summer School at Wayne Registration Form

M F

First

1. Name:_

Last

10. Course Request:

Subject 1: _____ Grade Level: ____

2. Address:	Remedial Accelerated Enrichment	
#/street Town/State Zip		
3. Telephone:	Subject 2: Grade Level:	
Home Cell	Remedial Accelerated Enrichment	
1. Emergency Contact:/Name Number	11. Authorization of Sending School: Credit may not be awarded without	
5. Sending School:	the approval of the sending school. (Not needed for Enrichment Courses)	
6. School Address:	Name of School Official and Role:	
7. Last grade completed (circle one): 8 9 10 11 12	School Official's Authorization Signature	
3. Do you receive supplemental help during the regular school year? Please		
circle: ESL HSPA Tutor Other:	Note to Counselors: For students taking remedial math: Please share the information in this document tinyurl.com/parcctemplate with wvsummerschool@gmail.com By checking this box □ and initialing below, I understand that the information in the spreadsheet above must be provided to NRESC. wvsummerschool@gmail.com Counselor's Initial PARCC Testing Acknowledgement x	
 Does the student have any additional needs for specialized support or support services Circle one: Yes No 		
f yes, IEP/504 must be attached to this form to register		
office Use Only:	•	
uition Payment: + = \$	Method of Payment: Cash Bank Check Money Order Credit Card	
Cost of Course Registration fee Total		
mount Received:\$ Date: Balance Due: \$	Paid in full: Initials:	



NRESC Summer School at Wayne: Health History and Emergency Information 2018

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 Emergence	cy Numbers:		
Mother's Name:	Address:		Phone:
Father's Name:	Address:		Phone:
Please list two emergency contacts who w	ill 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	al health of your child durin	g this past year?	
Physician's Name:	Address	S:	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:



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 strictly 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:
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