

# LAKWOOD CITY SCHOOLS

13701 LAKE AVENUE LAKEWOOD, OH 44107

SUMMER SCHOOL VOICEMAIL BOX: (216) 227-5799

WEB: www.lakewoodcityschools.org

## 2020 LCS SUMMER SCHOOL

### Mail-in Registration

#### STUDENT INFORMATION

Student Last Name: \_\_\_\_\_ Student First Name: \_\_\_\_\_

Student Preferred name: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Phone Number: (work) \_\_\_\_\_ (cell) \_\_\_\_\_

Secondary Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Home Address/City/State/Zip Code: \_\_\_\_\_

Does student have an IEP? \_\_\_\_\_ yes \_\_\_\_\_ no *If yes, a copy of the IEP must be attached with this application.*

Does student have a 504 plan? \_\_\_\_\_ yes \_\_\_\_\_ no *If yes, a copy of the 504 plan must be attached with this application.*

Current School: \_\_\_\_\_ Grade (2019-2020 school year) \_\_\_\_\_ SSID # \_\_\_\_\_

Home School Address/City/State/Zip Code: \_\_\_\_\_

Home School Guidance Counselor Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Do you anticipate in enrolling in Lakewood City Schools for the 2020-2021 school year \_\_\_\_\_ yes \_\_\_\_\_ no

Reason for attending summer school:

\_\_\_\_\_ Credit Recovery \_\_\_\_\_ Credit Advancement \_\_\_\_\_ Remediation of skills

\_\_\_\_\_ Other (please explain) \_\_\_\_\_

#### COURSE INFORMATION (Circle courses requested)

##### HIGH SCHOOL COURSE OFFERINGS:

###### 6 Week Offerings

	<u>Credit</u>
English 9 – 10 – 11	Full Credit
Algebra I	Full Credit
Survey of Algebra	Full Credit
Algebra II	Full Credit
Geometry	Full Credit

###### 3 Week Offerings

	<u>Credit</u>	<u>Session</u>
Physical Education	.25 Credit	1 ___ 2 ___
Practical Communications	.50 Credit	1 ___ 2 ___
Contemporary Reading Skills	.50 Credit	1 ___ 2 ___
Health	.50 Credit	1 ___ 2 ___
Government/Econ	.50 Credit	1 ___ 2 ___
Intro. to Life Science <b>A</b>	.50 Credit	1 ___ 2 ___
Intro. to Life Science <b>B</b>	.50 Credit	1 ___ 2 ___
Intro. to Physical Science <b>A</b>	.50 Credit	1 ___ 2 ___
Intro. to Physical Science <b>B</b>	.50 Credit	1 ___ 2 ___

##### MIDDLE SCHOOL COURSE OFFERINGS:

Math (All 6 Week Class)

Language Art (All 6 Week Class)

###### Session 1: (June 8 - June 25, 2020)

\*Social Studies 6 or 7 or 8 (circle grade level)

\*Science 6 or 7 or 8 (circle grade level)

This is 3 week course

###### Session 2: (June 29 - July 16, 2020)

\*Social Studies 6 or 7 or 8 (circle grade level)

\*Science 6 or 7 or 8 (circle grade level)

This is 3 week course

**PARENT/STUDENT ACKNOWLEDGEMENT**

The student and parent must *initial* each item below as indication of having read and accept the following:

Parent    Student

\_\_\_\_\_    \_\_\_\_\_    The student holds primary responsibility for the overall success or failure of any course work.

\_\_\_\_\_    \_\_\_\_\_    The student is expected to actively engage with the teacher and course activities or the student may be removed from the course with a failing grade.

\_\_\_\_\_    \_\_\_\_\_    The student must complete all classroom work AS WELL AS online assignments, homework and/or other assignments given by the teacher. Internet access outside of the school will be necessary.

\_\_\_\_\_    \_\_\_\_\_    I have read and understand the attendance policy for the Lakewood City Schools Summer School Program.

\_\_\_\_\_    \_\_\_\_\_    I understand that the Instructor reserves the right to remove any student from the course with a failing grade for issues involving plagiarism and copyright violation.

\_\_\_\_\_    \_\_\_\_\_    I understand that there are NO weighted grades for credits earned through summer school courses.

\_\_\_\_\_    \_\_\_\_\_    I have read the Lakewood City Schools General Information sheet and agree to follow all behavioral expectations and the Student Code of Conduct as outlined by the Lakewood City Schools Board of Education, their policies, regulations and guidelines.

**PAYMENT METHOD**

CASH: \_\_\_\_\_

CHECK: (Name on check) \_\_\_\_\_ (Check Number) \_\_\_\_\_

Personal checks will be accepted through June 16, 2020. After this date, only cash, MasterCard, VISA or money orders will be accepted.

CREDIT: \_\_\_\_\_ MC    \_\_\_\_\_ VISA    For security purposes, please provide credit card information telephone by calling the LHS Bookroom at 216-529-4047.

TOTAL AMOUNT PAID: \_\_\_\_\_

**SIGNATURES/ROUTING**

Student \_\_\_\_\_ Date \_\_\_\_\_

Parent \_\_\_\_\_ Date \_\_\_\_\_

**DISTRIBUTION:**

- \_\_\_\_\_ ORIGINAL—LHS Bookroom
- \_\_\_\_\_ Summer School Administrator
- \_\_\_\_\_ Summer School Teacher

<b>NOTES:</b>	
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