

DUBLIN  
UNIFIED



School District

# 2019 Middle School Summer School

## Counselor Approval Required

<p><b>Summer School Location:</b> Dublin High School 8151 Village Parkway Dublin, CA 94568</p> <p><b>Administrator:</b> Holly Ellison PH: (925) 833-3300 <a href="mailto:ellisonholly@dublinusd.org">ellisonholly@dublinusd.org</a></p> <p><b>Return registration forms to:</b> The school your student currently attends by June 7, 2019</p>	<p><b>Dates:</b> June 11 – July 3, 2019</p> <p><b>Hours:</b> 8:30 AM – 12:30 PM <b>Monday - Friday</b></p> <p>Short mid-morning break. *Food will be available for purchase.</p>
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**Register Early**  
**Enrollment based on Counselor or Teacher Recommendation**  
**(Referral Only)**

There is a \$25 suggested donation for the session. Checks can be made payable to [DUSD – Summer School](#) and attached to your application.

### Classes Offered:

- 6<sup>th</sup> Grade Reading/Math Remediation (Students entering 6<sup>th</sup> grade only)
- 7<sup>th</sup> Grade Reading/Math Remediation (Students entering 7<sup>th</sup> grade only)
- 8<sup>th</sup> Grade Reading/Math Remediation (Students entering 8<sup>th</sup> grade only)

Dublin Unified School District offers these courses designed for students one or more grade levels behind in reading and math. This is not an enrichment course.

## Middle School Registration and Enrollment Rules

- Enrollment is based on Counselor referral only.
- Registration is open to DUSD students entering the 6<sup>th</sup>, 7<sup>th</sup>, or 8<sup>th</sup> grade in Fall 2019.
- There is a \$25 suggested donation for each class.
- You must mail or hand-deliver your registration forms to your home school. We do not accept telephone, email, or fax registrations.
- Students and Parents are to assume they are scheduled for summer school unless they hear otherwise. No notifications will be sent confirming registration. The only communication to be sent will be if a class is cancelled or if you are placed on a waiting list
- Please notify your student's counselor or school office by phone or e-mail if you wish to cancel your registration. This may open up a space for someone on the waiting list.

## Attendance and Behavior Policies

- You must take the course for the entire session to pass summer school.
- You may not bring visitors to class with you.
- You must return your textbook or pay the book replacement cost.
- You will receive an "Incomplete" grade if you do not return or pay for the textbook.
- You must attend the first day of summer school or you will be dropped.
- You must wear appropriate school attire.

## Registration Checklist

Note: It is your responsibility to make sure the completed and correct forms are submitted to your student's **School Office by the June 7th deadline.**

### **Please Remember to.....**

- \_\_\_ Complete all the information on the Application form.
- \_\_\_ Get the signed approval of your student's counselor.
- \_\_\_ Include an easy-to-read email address for the parent/guardian.
- \_\_\_ Sign the Attendance and Behavior Agreement (both signatures).
- \_\_\_ Sign the Emergency Release form and provide an emergency contact.
- \_\_\_ Get your application in as soon as possible since classes may be full for students who apply later.

**Dublin Unified School District  
2019 Middle School Summer Program  
Application**

- ★ This application must include counselor, parent, and student signatures.
- ★ Behavior and Emergency Medical forms must be included. Incomplete forms will delay registration.

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**GRADE NEXT FALL      6      7      8**

**(Please print clearly)**

**Student's Name:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Current School:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Daytime Phone:** \_\_\_\_\_

**Evening Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Parent/Guardian Name:** \_\_\_\_\_ **Daytime Phone:** \_\_\_\_\_

**Evening Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Counselor's or Teacher's approval for current 5th graders**  
*(Signature required)*

**Counselor/Teacher Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Counselor's Comments:**  
\_\_\_\_\_  
\_\_\_\_\_

*For office use only  
Do not write below this line*

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Date application received: \_\_\_\_\_ Time received: \_\_\_\_\_ Initials: \_\_\_\_\_

Payment received: Date: \_\_\_\_\_ Check/Money order no.: \_\_\_\_\_ Amount: \_\_\_\_\_

Date Deposited: \_\_\_\_\_

# Summer School 2019

## Attendance and Behavior Agreement For Students and Parents

Student's Name: \_\_\_\_\_  
Last First

### General Rules

- You must attend the first day of summer school or you will be dropped and a student on the waiting list will be enrolled in your place.
- You must take each course for the entire 4 weeks to pass summer school.
- You may not bring visitors to class with you.
- You must return your textbook or pay the book replacement cost if you drop the course or before you take the final.
- You will receive an "Incomplete" grade if you do not return or pay for the textbook.
- Appropriate school attire is required.

### Absences and Tardies

- You may have no more than one absence for a session.
- Summer School will drop students who have additional absences.
- You will not be excused for illness, accidents, or special circumstances. In Summer School, there is no difference between an excused and an unexcused absence.
- You must attend the first and last day of Summer School to pass summer school.
- If you do not attend the first day, you are automatically dropped.
- If you enroll after the first day, you automatically receive one absence.
- Summer School will mark you absent for the whole day for any of the following reasons:
  - Missing an entire day of school
  - Arriving to class after 9:00 AM
  - Leaving the campus grounds during the school day, even during mid-morning break
  - Leaving class early for an appointment
- Summer School will count excessive tardies as absences. You will receive a tardy for the following reasons:
  - Entering class after attendance is taken, even if you are only one minute late
  - Returning late from any breaks, including restroom breaks

### Behavior and Discipline

- Students should practice good behavior. At the first class session, the instructor will provide students with information about expected proper behavior.
- Students who receive a first discipline referral must come to the Administration Office. The Summer School Office will notify the Parent/Guardian of the referral and the planned disciplinary action.
- Summer School will drop any student who receives a second referral, and will enforce the Education Code 48900 related to suspension and expulsion.

We have read, understand, and agree to abide by the Attendance and Behavior Policies of the Dublin Unified Summer School Program. We understand that failure to abide by these policies will result in consequences that may include dismissal from the Summer School program.

\_\_\_\_\_  
Parent/Guardian Signature (Required) Date \_\_\_\_\_

\_\_\_\_\_  
Student Signature (Required) Date \_\_\_\_\_

## Emergency Information

### Emergency Contact Required. Medical Information Strongly Recommended

In the event of illness or injury, notify the following person(s) **if the parent cannot be reached**: (please DO NOT list parent/guardian listed on first page of application)

1.			
	Name	Address	Phone
2.			
	Name	Address	Phone
3.			
	Physician Name	Phone	Dentist Name Phone
4.			
	Medical Carrier	Medical ID Number	

**Health Concerns:**  
Please list any health concerns the school staff needs to be aware of during summer school:

\_\_\_\_\_

\_\_\_\_\_

**Medications taken daily:**

\_\_\_\_\_

\_\_\_\_\_

## Release and Medical Consent

(Must be filled out or application will be returned)

My child, \_\_\_\_\_, has my permission to participate in the Dublin Unified School District Summer School Program. I release Dublin Unified School District, its instructors and assistants from any liability arising from my child's participation in said program. I understand, acknowledge, and agree that the District, its employees, officers, agents, or volunteers shall not be liable for any injury/illness suffered by my son/daughter that is incident to and/or associated with preparing for and/or participating in said program. I understand that I hold Dublin Unified School District, its officers, agents, and employees harmless from any and all liability or claims which may arise as a result from my child's participation in said programs. I understand the Dublin Unified School District does not provide health and medical insurance for the participants. Consent is hereby given to the instructors and/or coordinators to seek aid if required in the case of emergency.

**I have read and agree to the attendance and program policies and give my consent to authorize Emergency Medical Care for my child.**

\_\_\_\_\_  
Parent / Guardian Signature Date

Parent/Guardian Home Phone: \_\_\_\_\_

Parent/Guardian Work Phone: \_\_\_\_\_

Parent Alternate Phone Number: \_\_\_\_\_  
(Where he/she may be reached between 8:30 AM – 12:30 PM)