

# Summer School



## Summer School Registration 2009

(Please complete *FRONT* and *BACK* and return to the ASK Business Office with full payment)

### Student Information

Student Name:	Date of Birth:	
Current School:	Grade Level Completed:	
Parent Name:	Home Phone:	Mobile:
Allergies or Special Medical Needs:		
Emergency Procedures - If the Summer School 2008 Principal, nurse, secretary or teacher are unable to contact me regarding my sons/daughter's health, or in the case of an emergency, I hereby authorize a Summer School official to contact appropriate medical personnel to address his/her needs.		
Parent Signature:		

### Course Information

Session	Class/Program Name	Course Code (See Brochure)	Fees
Session 1 (9:00 a.m. – 11:10 a.m.)			KD
Session 2 (11:30 a.m. – 1:40 p.m.)			KD
			KD
		Total Amount Due	KD

### Tuition:

Middle School & High School

Each Session:    KD 125

## Behavior/Attendance Policy

By signing below, you acknowledge that 3 behavior referrals (these include tardiness and unexcused absences) from any ASK staff member will result in the immediate dismissal of my son/daughter from the Summer School program. There will be no refund of tuition.

Parent Signature:

Student Signature:

## High School Credit Policy

High School Credit – In order for a student to receive .5 credits for courses taken at ASK Summer School, the student must have received a failing grade at their present school in the same course he/she is applying for. This must be confirmed by the student's current Guidance Counselor, who must fill out the information below.

Guidance Counselor Name:

School Name:

Name of Course Failed: