SANTANA HIGH SCHOOL
2019 SUMMER SCHOOL APPLICATION

Incoming 9th Grade Application

Name: _____ Student I.D. #: _____ Date of Birth: _____
Last First

Phone #: _____ _____ _____
Home # Parent/Guardian Wk. # Alt./Cell #

Address: _____
Number Street Apt. # City Zip

Parent/Guardian Name: _____

School you will attend in the fall: _____

Email Address: _____

Session I Course Offerings June 17 to July 3 7:20-9:50 Per. 1 9:50-10:05 Break 10:05-12:35 Per. 2	
M605	Integrated Math IC-2**

** This course is designed as an accelerated program to prepare students for Integrated Math 2 Honors in the fall.

SUBMISSION OF THIS FORM DOES NOT GUARANTEE ENROLLMENT IN THIS CLASS. ***COURSE OFFERINGS MAY BE CANCELLED DUE TO INSUFFICIENT ENROLLMENT, TEACHER AVAILABILITY OR FUNDING.***

I understand that I am to attend class every day for the hours indicated for the course I have selected. I understand students not attending the first day may lose their place in class. In addition, I understand that if, for any reason, I am absent for more than 10 hours in a 3 week period, I will be dropped from the class and lose credit. I also agree to abide by the same rules and conduct as during the regular school year.

_____ _____
Student Signature Date Parent/Guardian Signature Date

Counselor / Academic Advisor Signature: _____ Date: _____