



**2021 High School Summer School
ENROLLMENT APPLICATION**

Name: _____ Student ID: _____ Date of Birth: _____

Address: _____

City: **Check one. Indicate zip code if your address is GAINESVILLE.**

- | | | |
|--|---|---|
| <input type="checkbox"/> Gainesville (_____) | <input type="checkbox"/> Flowery Branch 30542 | <input type="checkbox"/> Oakwood 30566 |
| <input type="checkbox"/> Murrayville 30654 | <input type="checkbox"/> Clermont 30527 | <input type="checkbox"/> Lula 30554 |
| <input type="checkbox"/> Braselton 30517 | <input type="checkbox"/> Chestnut Mtn. 30502 | <input type="checkbox"/> Gillsville 30543 |

Name of Parent: _____ Work Phone: _____

Home Phone: _____ Emergency Phone: _____

Emergency Contact Person: _____

- School of enrollment in 2020-2021
- | | |
|--|--|
| <input type="checkbox"/> Cherokee Bluff HS | <input type="checkbox"/> Johnson HS |
| <input type="checkbox"/> Chestatee HS | <input type="checkbox"/> North Hall HS |
| <input type="checkbox"/> East Hall HS | <input type="checkbox"/> West Hall HS |
| <input type="checkbox"/> Flowery Branch HS | <input type="checkbox"/> LCCA |
| | <input type="checkbox"/> The Foundry |

Are you served in a resource program during the regular school year? _____ (yes or no)

Will you graduate at the end of the summer school program? _____ (yes or no)

Course(s) Desired (Give Specific Name)

Early Registration (ends May 29) \$ 0.00
Regular Registration \$ 0.00
No out of county students accepted

Counselor's Signature



OFFICE USE ONLY

Behavior Contract Returned: _____ Yes _____ No

Amount of Payment \$ 0.00

School Official's Signature: _____