

2023 High School Summer School

STUDENT SUMMER SCHOOL ENROLLMENT APPLICATION

STUDENT LAST NAME:			STUDENT FIRST NAME:				
DATE OF	BIRTH:						
ADDRESS	·:						
CITY:	_	STATE:		ZIP:			
NAME OF	F PARENT:						
PARENT'S WORK PHONE:			PARENT'S MOBILE PHONE:				
EMERGEI	NCY CONTACT:						
EMERGEI	NCY PHONE:						
	OF ENROLLMENT he box beside the		nrolled in fo	or the 2022-23 school year.)			
	Cherokee Bluff	HS		LCCA			
	Chestatee HS			North Hall HS			
	East Hall HS			The Foundry			
	Flowery Branch	HS		West Hall HS			
	Johnson HS						

School Of	fficial's Signature		Date				_	
Verification	of Courses by School Official:							
Summer S	chool Contract Returned:	☐ Yes		No				
OFFICE USE	ONLY							
	Ğ						_	
Student/Parent Signature			Date	Date				
		<u> </u>					_	
		,					_	
Course(s)	Desired (Give Specific Name)						
Will you g	graduate at the end of the su	mmer schoo	ol program?		☐ Yes	□ No		
	Special Education							
	ELL							
	504							
	erved in any of the following I that apply.)	Programs			,			