

FINDLAY CITY SCHOOLS SUMMER SCHOOL
June 14 - July 23, 2010
HIGH SCHOOL OFFERINGS

<u>Course</u>	<u>Fees</u>		<u>Credit</u>	<u>Class Time</u>	<u>Prerequisite</u> (Completion of Grade)
	<u>Resident/Non Resident</u> (Semester/Year)				
Algebra I	\$90/180	\$118/236	1	8 a.m.-12:15 p.m.	8
American History	\$90/180	\$118/236	1	8 a.m.- 12:15 p.m.	10
Communications I	\$90	\$120	.5	8 a.m.-12.15 p.m. (3 week session 6/14-7/2)	8
Communications II	\$90	\$120	.5	8 a.m.-12.15 p.m. (3 week session 6/14-7/2)	Comm. I
Communications I	\$90	\$120	.5	8 a.m.- 12:15 p.m. (3 week session 7/6-7/23)	8
Communications II	\$90	\$120	.5	8 a.m.-12.15 p.m. (3 week session 7/6-7/23)	Comm. I
Economics	\$90	\$120	.5	8 a.m.-12:15 p.m. (3 week session 6/14-7/2)	10
American Government	\$90	\$120	.5	8 a.m.- 12:15 p.m. (3 week session 7/6-7/23)	10
World Studies	\$90/180	\$118/236	1	8 a.m.- 12:15 p.m.	11
English 9 C.P.	\$90/180	\$118/236	1	8 a.m.- 12:15 p.m.	8
English 10 C.P.	\$90/180	\$118/236	1	8 a.m.- 12:15 p.m.	9
English 11 C.P.	\$90/180	\$118/236	1	8 a.m.- 12:15 p.m.	10
English 12 C.P.	\$90/180	\$118/236	1	8 a.m.- 12:15 p.m.	11
Global Science	\$90/\$180	\$118/236	1	8 a.m.- 12:15 p.m.	9
Health	\$90	\$120	.5	8 a.m.- 12:15 p.m. (3 week session 6/14-7/2)	8
Health	\$90	\$120	.5	8 a.m.- 12:15 p.m. (3 week session 7/6-7/23)	8
Physical Education (additional activity cost possible)	\$90	\$120	.25	8 a.m.-12:15 p.m. (3 week session 6/14-7/2)	8
Physical Education (Additional activity cost possible)	\$90	\$120	.25	8 a.m.-Noon (3 week session 7/6-7/23)	8
<u>MIDDLE SCHOOL CLASSES</u>					
English 6	\$125	\$165		8 -8:50 a.m.	5
English 7	\$125	\$165		8 -8:50 a.m.	6
English 8	\$125	\$165		8 -8:50 a.m.	7
Reading 6	\$125	\$165		9 -9:50 a.m.	5
Reading 7	\$125	\$165		9 -9:50 a.m.	6
Reading 8	\$125	\$165		9 -9:50 a.m.	7
Math 6	\$125	\$165		10-10:50 a.m.	5
Math 7	\$125	\$165		10-10:50 a.m.	6
Math 8	\$125	\$165		10-10:50 a.m.	7
Social Studies 6	\$125	\$165		11-11:50 a.m.	5
Social Studies 7	\$125	\$165		11-11:50 a.m.	6
Social Studies 8	\$125	\$165		11-11:50 a.m.	7

COSMETOLOGY

A Cosmetology class will be held at Millstream East. This class is a prerequisite for 11th and 12th grade cosmetology students. The dates for this class are tentatively 6/07/10 to 7/16/10. There are no classes on 7/5/10. The class will run from 8 a.m. till 12:15 P.M. The cost is \$180. There is also an additional \$40.00 (approx.) fee cost that will be paid separately to purchase a kit from a supply store. For more information please call (419) 425-3548.

FINDLAY CITY SCHOOLS
June 14 - July 23, 2010
SUMMER SCHOOL

Findlay City Schools
Findlay, Ohio

Chris Renn
Principal

GENERAL INFORMATION

- WHO:** Any student enrolled in Findlay or area schools will be accepted in the summer school program if he/she meets the prerequisites. Students from districts other than Findlay should make sure their home school will accept these credits. Findlay students will be given priority over non-district students regarding space availability.
- WHERE:** Findlay High School-Freshman Wing, 1200 Broad Ave., Findlay, OH 45840
- WHEN:** Monday, June 14, 2010 through Friday, July 23, 2010. **Please note: There are no classes on Monday, July 5.**
- TIMES:** 8 a.m. to 12:15 p.m. unless otherwise noted.
- COSTS:** Vary from class to class--please refer to schedule sheet. Grades for completed classes will not be released until all fees and obligations are paid in full.
- REFUND POLICY:** Refunds are only made through the end of the first week of classes. Refunds will be mailed to the student's home. **Summer school fees are not subject to standard fee waivers.**
- CLASS:** A minimum of 12 students is needed for a class to be held. Classes that do not reach the minimum enrollment will be canceled and students will be informed as soon as possible. **If you are not contacted about a cancellation, assume the class will be held.** Whenever enrollments for a particular class warrant creating added sections, a waiting list will be created and an additional section will be created if possible.
- GRADING PROCEDURES:** Grades will be given to the student on the last day of class. A copy will be mailed to home schools (as indicated on student registration forms) within five days of the last day of summer school. If your home school changes, please notify us as soon as possible in order to assure proper mailing. Grades will not be released until all fees have been paid in full.
- ATTENDANCE:** There are very strict attendance regulations for middle and high school students in summer school. Parents should not register their children if vacations and other activities conflict with summer school dates.
- REGISTRATION:** **ALL FORMS MUST BE COMPLETED AND ACCOMPANIED BY THE FULL COURSE FEE. A REGISTRATION FORM MUST BE COMPLETED ALONG WITH AN EMERGENCY MEDICAL FORM.**
- MAIL/DROP OFF REGISTRATION:** Fill out and mail the attached registration form along with payment to Mr. Chris Renn, Attn: Summer School, Findlay High School, 1200 Broad Ave., Findlay, OH 45840. You may also drop off the forms in the Main Office at Findlay High School. Classes fill quickly--to assure your place in class, send in your registration early. Enrollments will be accepted on first-come, first-served basis. The deadline for mail/drop off registration is Wednesday, June 9, 2010.
- WALK-IN:** Walk-In Registration will be available Friday, June 11, 2010 from 8 a.m. to Noon and 1 to 4 p.m. Registration will be located in the 9th Grade Principal's office of Findlay High School-Freshman Wing. Please use the freshman doors of the school. Walk-ins will not be processed prior to June 11, 2010.

Summer School Registration Form ** Findlay City Schools

This Registration Must be Filled Out Completely Before It Will Be Processed

Name _____ Phone _____

Address _____ City _____ Zip _____

Gender: Male _____ Female _____ Age _____ Birthdate _____

ESL Student: Yes _____ No _____

Are you currently on an Individual Education Plan? Yes _____ No _____

Grade Completed in 2009/10 _____ Grade Entering in 2010/11 _____

School Attended in 2009/10 _____ School District _____

School Address _____

School District of Your Residence
(if different from the one you attend) _____

Send grades to: _____

Courses(s) You are Registering For: _____
(If only taking 1 semester of a year-long course, list semester needed—1st or 2nd)

Counselor's signature _____
(Required for taking advanced course)

The undersigned understands that all provisions of the Findlay High School and Middle School Discipline Codes apply to all summer school students.

Student Signature _____

Parent Signature _____
(if student is under 18)

This form must be completed and accompanied by the registration fee. **Make checks payable to Findlay City Schools.** Mail to: Findlay Summer School, c/o Chris Renn, Findlay High School, 1200 Broad Ave., Findlay, OH 45840. **Deadline for mail registration is Wednesday, June 9, 2010.**

OFFICE USE ONLY

Amount Enclosed \$ _____ Date Rcvd: _____ Cash: ___ Check: ___ Check #: _____

Findlay City School District* Emergency Medical Authorization (O.R.C. 3313.712)
2010 FINDLAY SUMMER SCHOOL**

Student's Name _____ Phone Number (Home) _____

Address _____

Purpose: To enable parents and guardians to authorize the provision of emergency treatment for children who become ill or injured while under school authority, when parents or guardians cannot be reached.

Mother's Name _____ Daytime Phone _____

Father's Name _____ Daytime Phone _____

Other's Name _____ Daytime Phone _____

Name of Relative or Childcare Provider _____ Relationship _____

Address _____ Phone _____

PART I OR II MUST BE COMPLETED

Part I - To Grant Consent:

I hereby give consent for the following medical providers and local hospital to be called:

Doctor _____ Phone _____

Dentist _____ Phone _____

Medical Specialist _____ Phone _____

Local Hospital _____ Emergency Room Phone _____

In the event reasonable attempts to contact me have been unsuccessful, I hereby give my consent for (1) administration of any treatment deemed necessary by above-named doctor, or, in the event the designated practitioner is not available, by another licensed physician or dentist; and (2) the transfer of the child to any hospital reasonably accessible.

This authorization does not cover major surgery unless the medical opinions of two other licensed physicians or dentists, concurring with the necessity for such surgery, are obtained prior to performance of such surgery.

Facts concerning the child's medical history including allergies, medications being taken and physical impairments to which a physician should be alerted: _____

Signature of Parent or Guardian _____ Date _____

Address _____

Part II - Refusal to Consent (DO NOT COMPLETE IF YOU COMPLETED PART I)

I do **NOT** give my consent for emergency medical treatment of my child. In the event of illness or injury requiring emergency treatment, I wish the school authorities to take the following actions:

Signature of Parent/Guardian _____ Date _____

Address _____