



SUMMER SCHOOL, INC.

OFFICE USE ONLY	
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M.O. # _____	PayPal # _____
Date Received _____	

## HIGH SCHOOL STUDENT REGISTRATION FORM & RECEIPT OF PAYMENT

### Directions

- Complete the registration form in blue/black ink (please print) and submit by **April 15 to a GUSD school, or the GEF Summer School Office – 223 N. Jackson St., Glendale 91206.** (818-247-0466) May also be mailed to GEF Summer School mailbox, 1125 E. Broadway #356, Glendale 91205. Confirmations will be sent in early May.
- Attach a personal check, money order (payable to GEF Summer School) or receipt of credit card payment (if paid online through GEF Summer School website [www.gefsummerschool.org](http://www.gefsummerschool.org)) with student's name noted on payment.

### STUDENT INFORMATION

Last Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

First Name: \_\_\_\_\_ aka: \_\_\_\_\_ Birthdate \_\_\_\_\_

Address: \_\_\_\_\_  
Number and Street Apt# City, Zip

School of Attendance in 2017-18: \_\_\_\_\_ 2017-18 Grade Level: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell Number: ( ) \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ / \_\_\_\_\_  
Name Relationship Phone

### EMERGENCY MEDICAL RELEASE

I understand that in case of emergency requiring medical treatment for my child, I may not be available for consent and that treatment may be withheld without my prior consent. **Therefore, in case of a medical emergency, GEF Summer School is authorized to call 911 and to have such attention given to my child as deemed necessary by the paramedic, nurse, physician, or hospital in charge.**

\_\_\_\_\_  
Parent/Guardian Signature Date

### MEDICAL INFORMATION

Please list any medical conditions or allergies:

\_\_\_\_\_  
Will the student need to take medication during school hours?

No

Yes Name of Medication: \_\_\_\_\_

Name of Prescribing Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

### ACCESS TO STUDENT INFORMATION (GUSD STUDENTS)

My student attends a GUSD school, and I give the GEF Summer School permission to view the following from the GUSD Student Information System: contact information and medical information. The GEF Summer School has permission to transfer my student's grades to a GUSD school and the GUSD staff can access GEF Summer School information.

\_\_\_\_\_  
Parent/Guardian Signature Date

Name \_\_\_\_\_ ID # \_\_\_\_\_ GEFSS last year? Y N

**GEF SUMMER SCHOOL COURSE OFFERINGS—Unless labeled, courses are year-long, 10 credits.**

**High School**

- Biology 1, 2 (plus \$10 lab fee)
- Ceramics 1, 2 \*\* at CVHS only (plus \$30 lab fee)
- Sport Medicine 1, 2
- Chemistry 1, 2
- Economics (semester)
- Government (semester)
- Health (semester)
- Spanish 5, 6
- Trigonometry (semester) at CVHS only
- U.S. History 1, 2
- World History 1, 2

\*\* Ceramics 1-2 meets the Fine Arts graduation requirement. If a student has already met the Fine Arts graduation requirement, one semester of Ceramics 1-2 can meet the Career Prep graduation requirement.

**REGISTRATION**

5 CREDITS per semester. A student must take BOTH semesters to count toward a year-long 10 CREDIT course. ONLY students needing to remediate/repeat a D or F semester grade may take one semester of a year-long course. **No refunds given after classes begin.**

**Tuition: \$570 for a year-long, 10 unit class \$285 for a semester long, 5 unit class**

**Tuition reduction for students participating in the Federal Lunch Program:**

**\$470 for a year-long class \$235 for a semester class**

**If class specifies a lab fee, include that amount with payment.**

**Classes filled on a first come, first served basis.**

	Course	Location (CV or Glendale)
1 <sup>st</sup> Semester June 11-26	First Choice: Second Choice:	
2 <sup>nd</sup> Semester June 27- July 13	First Choice: Second Choice:	

**COUNSELOR VERIFICATION:** \_\_\_\_\_ Name

**BEHAVIOR & STUDENT CONDUCT—Rules, policies and procedures are available online**

[www.gefsummerschool.org](http://www.gefsummerschool.org) My student and I understand that my student is required to abide by GEF Summer School rules, policies (available on the summer school website: [www.gefsummerschool.org](http://www.gefsummerschool.org)) as well as the laws for student behavior according to California Education Code. Failure to comply with the above mentioned rules for student behavior/conduct may result in the dismissal of my student from the GEF Summer School with **no refund**.

**Drop Policy:** Students who drop summer school must fill out a drop slip **before** the end of the semester. Drop slips are located at the desk of the GEF Summer School Registrar, and on the GEF Summer School website, [www.gefsummerschool.org](http://www.gefsummerschool.org). Parent and student signatures are required. Textbooks must be returned. No refund is given. This action is final.

**Transcript Policy:** GUSD students may elect to have their summer school grade not appear on their home school transcript. This will mean that the class taken may not be considered 'completed,' no credit will be given, and it may not be used as a prerequisite for any sequence of classes. Withhold Grade form must be returned to the GEFSS office by July 19, 2018, 1:00 p.m. This action is final.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**GEF Summer School, Inc. Nondiscrimination Policy**

The GEF Summer School, Inc. admits in its summer school program students of any race, color, religion, gender, sexual orientation, national origin and ethnic origin to all the rights, privileges, programs and activities generally accorded or made available to students at the summer school. It does not discriminate on the basis of race, color, religion, gender, sexual orientation, national or ethnic origin in the administration of its educational policies or other programs it administers.



Courses meet University of California A-G requirements.

Fully accredited by WASC  
Courses approved by NCAA