

SUMMER SCHOOL APPLICATION



Morningside Academy

Student Name _____

Age _____ Grade completed 2018-19 _____ Date of birth _____

2018-2019 School Name _____

Parent/Guardian Name _____

Street Address _____

City _____ State _____ Zip _____

Phone (home) _____ (cell) _____

Email _____

PROGRAM INTEREST

Check areas needing most improvement:

First choice

- Reading
- Writing
- Math
- Elementary Basics
- Content Prep (a.m. only)

Second choice

- Reading
- Writing
- Math
- Elementary Basics
- Content Prep (a.m. only)

SESSION SCHEDULE

Please select the time of day you wish to attend:

- 9:25 am – 12:10 pm 1:05 pm – 3:50 pm Both

Please select your sessions (minimum two required):

- July 8 – 12 July 15 – 19 July 22 – 26 July 29 – Aug 2 All four sessions

ASSESSMENT & ORIENTATION SESSION

Grades 1-2: 9:30 am – 1:30 pm

Grades 3-9: 9:30 am – 3:00 pm

Choose one date:

- Saturday, May 4 Saturday, May 18 Monday, June 10