

Jefferson Joint School District Summer School Application  
Application and Check are due to RHS Counseling Office by May 24, 2016

Name: \_\_\_\_\_ Referring school: \_\_\_\_\_

Home Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Work Phone: \_\_\_\_\_

**Cost of Classes:**

Students meeting at-risk criteria: No Cost

Students who have Free/Reduced Lunch: will be charged \$50 per class

Students who do not meet the above two qualifications will be charged \$75 per class

**(A class is one individual section: A and B sections are two different classes)**

**Date of Classes:**

Classes will begin on Monday, June 6, 2016.

Classes will end on Thursday, June 30, 2016.

**Time of Classes:**

Classes will be from 8:00-12:00 and 12:30-4:30.

**Place of Classes:**

Classes will be held at Rigby High School.

**Special Education: YES or NO (PLEASE CIRCLE ONE DOCUMENTATION)**

School will verify any approved accommodations.

*Please list three classes you need to take and be specific.*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**At-risk requirements**

Any three of the following:

1. Repeated a grade
2. Absent more than 10%
3. GPA of less than 1.5
4. Failed basic skill subject
5. Two or more semester or trimester credits behind

**OR**

Any one of the following:

1. Substance abuse
2. Pregnant or a parent
3. Emancipated student
4. Previous Dropout
5. Behavioral problems
6. Court referral

**Counselor must circle qualifying criteria.**

\_\_\_\_\_  
Counselor signature Date

\_\_\_\_\_  
Student signature Date

\_\_\_\_\_  
Parent signature Date