High School Summer School Registration

Regional Summer School Program
MONTGOMERY COUNTY PUBLIC SCHOOLS
Rockville, Maryland 20850 • 301-279-3202

MCPS Form 325-5HS
March 2016

PART I: To be completed by PARENT/GUARDIAN. *PLEASE PRINT ALL INFORMATION.*

MCPS ID Number | **Date of Birth** ___/___/___

Age _____ Grade _____ (in September)

Student's Last Name | **First Name** | MI

Parent/Guardian's Last Name | **First Name** | MI

Home Phone ___-___-____ | **Work Phone** ___-___-____ | **Cell Phone** ___-___-____

E-mail _____

Address _____
Street City State Zip

Reason for taking this course: ❑ Original Credit ❑ Failure ❑ Repeating for higher grade

Does the student have one of the following: ❑ IEP ❑ 504 Plan

Name of HIGH SCHOOL now attending _____ Name of SUMMER SCHOOL SITE _____

PART II: REGISTRATION—Counselor must complete this part of form. Refer to the MCPS Summer School Brochure for registration information.

HIGH SCHOOL REGISTRATION—Register for each 3-week course on a separate form.

Course Number _____ Course Name _____

Is student graduating at end of the summer session? ❑ Yes ❑ No

SIGNATURE OF COUNSELOR REQUIRED

_____ ____/____/____ _____
Signature, Home School Counselor *Date* *Print Name*

_____ ____/____/____ _____
ESOL Resource Teacher *Date* *Print Name*

Incoming Grade 9 students also must obtain signature of receiving high school principal or designee.

_____ ____/____/____ _____
Signature, High School Principal or Designee *Date* *Print Name*

PART III: PAYMENT—Attach check or money order for the *REQUIRED TUITION* amount.

- Student **may** qualify for reduced tuition. To apply, attach MCPS Form 325-4: *Application for Partial or Full Waiver of Summer School Tuition* and supporting documents.

Method of Payment

❑ Cash $ _____ ❑ Check # _____ ❑ Money Order # _____ Amount $ _____
Make checks payable to **MCPS**. (A $25.00 fee will be assessed for returned checks.)

❑ Charge $_____ Please pay online using the Online School Payments website at http://osp.osmsinc.com/MontgomeryMD. From the left menu select "REGIONAL SUMMER SCHOOL FEES." Then select the Regional Summer Fees (HS) link. Online payment is available using credit and debit cards (**Visa/MasterCard only**) after 6 p.m. the day the registration is processed. Registration is not complete until payment is made.

PART IV: PARENT'S/GUARDIAN'S SIGNATURE: Parent's/guardian's signature certifies that:

- Student has met all immunization requirements.
- The parent/guardian will provide the summer school site administrator with a copy of the accommodations included on the student's Individual Education Plan (IEP) or 504 Plan.

_____ ____/____/____
Signature, Parent/Guardian *Date*

DISTRIBUTION: COPY 1/Regional Summer School office; COPY 2/Home School