

Adult & Community Education Services

SUPER IN 7 SUMMER SCHOOL PROGRAM 2018

Wednesday, July 4 to Tuesday, July 24, 2018 ♦ 8:30am - 1:30pm

The "Super In 7" program will provide an experience to help students currently in Grade 6 prepare for Grade 7. At the end of the program, a progress report is mailed home with a copy sent to the student's day school. The report highlights the focus of the Summer School curriculum in Language, Mathematics and Skills for School Success and provides some indication of the benefits of the Summer School program for the student.

Parent/Guardians please submit completed application to your child's Elementary School by Friday June 22, 2018

Student Registration	PLEASE PRINT USING BLACK OR BLUE PEN ONLY
OEN #:	_
Last Name:	First Name:
Address:	City:
APT/UNIT/P.O. Box:	Postal Code:
Home #: ()	Cell #: ()
Gender: □ MALE □ FEMALE	Date of Birth:
Language First Spoken:	Status in Canada:
Medical Condition (if applicable):	
EMERGENCY CONTACT INFORMATION	
Name (First & Last):	Relationship to Student:
Home #: (Cell #: () Work#: ()
Current Elementary School for 2017/2018 (Grade 6):	
PLEASE CHOOSE ONE SUMMER SCHOOL SITE	E
☐ A.N. Myer Secondary, 6338 O'Neil St. Niagara Falls	☐ Eastdale Secondary, 170 Wellington St Welland
☐ Sir Winston Churchill Secondary, 101 Glen Morris D	Dr St. Catharines
How did you hear about "Super in 7" program? □ School/Teacher/Principal □ Posters □ Direct Ma	ailing □ Internet (website) □ Social Media (facebook, twitter)
For parents to receive a letter outlining information about	the program including schedule information, supplies needed,
transportation, first day procedures etc please provide ye	our email address below to receive the letter via email. The letter
_	nmer by June 30th click on the Gr8 in 8 program information.
Parent/Guardian e-mail:	
Parent/Guardian's Signature:	Date: YY/M M/DD
Places see reverse side for school information to be sample	stad by your child's Taachar and Dringinal



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TEACHER RECOMMENDATIONS

- The following checklist of information must be completed on each student as a condition of admission to the program
- Please indicate program areas of concern before sending this form to the Adult & Community Education Services office.

MATHEMATICS	Θ	LANGUAGE	②
Number sense and Numeration		Writing: Proofreading/revising/editing	
Measurement		Writing: Conventions (Grammar, Spelling)	
Geometry and Spatial Sense		Writing: Organization & Communication of ideas, structure & style	
Patterning and Algebra		Reading: Reading Comprehension	
Data Management and Probability		Reading: Retelling/Responding to literature	
		Oral & Visual Communication: Listening	
		Expression of ideas	

	Iditional and/or supportive information regarding learning styles mmer School Teacher in meeting needs of individual students.
Attached is a copy of the current school year report cards	Attached is a copy of the Individual Education Plan (if available)
Does the student require use of SEA equipment? Circle Y or N	LRT Contact (for SEA arrangements):
*If yes, please email the contact person to arrange a SEA	equipment transfer.
Teacher's Name:(Please Print)	Teacher's Signature:
Principal's Name:(Please Print)	Principal's Signature:
Date:	
The Home School Principal is required to reco	mmend any student wishing to attend Summer School.

Schools please submit completed registration by Friday June 22, 2018 and send using one method only to:

Courier Mail: Adult & Community Education, Attention: Kelly Levesque, 535 Lake Street, St. Catharines, ON L2N 4H7

Fax: (905) 646-7042 Attention: Summer School

DO NOT send registrations by email for this program - send only using Board Courier or Fax