



945 W. Apache Trail Apache Junction, AZ 85120 T 480-288-0337 www.apachetrailhs.com

Apache Trail High School Summer School

Students are able to participate in one class per session. Perfect attendance is required for students to receive .5 credit for a class. All students will receive FREE breakfast and lunch daily. Classes are a total of 15 days, Monday-Friday per session. Place an "X" next to the class you want to attend. If a student misses more than one hour of any class for any reason, they will not be able to earn credit. No accommodations will be made. Do not sign up for classes if you know you have a prior appointment. Classes are from 8:00 AM - 11:30AM (Lunch: 11:30-11:50) and 12:00-3:30PM. Each class will cost \$50. This fee is non-refundable after the first hour of class, on the first day of the class. If the student takes at least one non-CBE class they will receive a free CBE class. However, Just CBE is available for \$50 for each class. Any discipline issues will not be tolerated, and students will be removed without a refund. Transportation will be available for those students in need for both sessions. It is recommended non Apache Trail HS students bring in an unofficial transcript so we can recommend a class. Future Freshman for the 2018-2019 year classes are free with a fall enrollment.

Session 1: 8:00-11:30AM

Session 2: 12:00-3:30PM

Financial Algebra (10-12)

Algebra Foundations/Algebra A (9-10)

English Literature (9-10th)

English Composition (11-12th)

Work Experience (Kasapo)

Backbone Computer Based Education (Walker/Kasapo)

Choose class from list below.

Subject: _____

English Credit Recovery

- English 9-1
- English 10-1
- English 11-1
- English 12-1

Social Studies

- American History 1
- American History 2
- Economics
- Government
- World History 1
- World History 2

Elective Credit

- Health
- Life Time Fitness
- Personal Finance
- Psychology
- Sociology
- Anthropology
- Civics

Fine Arts Credit

- Art Appreciation
- Career Essentials
- Spanish 1A
- Spanish 1B
- Humanities 1
- Humanities 2

Science Credit

- Earth Space Science 1
- Earth Space Science 2
- Physical Science 1
- Physical Science 2

Each CBE class is worth .5 credit. Example: Finish World History A and World History B to earn one credit for Social Studies credit.

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Apache Trail High School Summer School Registration Form

| STUDENT INFORMATION | | | | | |
|-----------------------------------|----------------------|--|------|--------------------------|---------|
| Student's Last Name | Student's First Name | Student's Middle Name: | Age: | Grade: | Gender: |
| Ethnicity: (Please Mark Only One) | | Race: (Please mark ONE or MORE of the following) | | Student's email address: | |

| | | | | | | |
|---|--|--|---|--|--------------------------------|--------------------------------|
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> American Indian/Alaska Native | <input type="checkbox"/> Black or African American | <input type="checkbox"/> Not Hispanic or Latino | <input type="checkbox"/> Hawaiian/Other Pacific Islander | <input type="checkbox"/> White | <input type="checkbox"/> Asian |
| Date of Birth (Month/Day/Year) / / | Birth City | Birth State | Birth Country | | Student's Cell Phone | |

SCHOOL INFORMATION

| | |
|---|---|
| Name of School Attended 2016-2017 School Year | School Location (City, State, Zip Code, if known) |
|---|---|

PARENT/GUARDIAN/ADULT STUDENT (over 18) INFORMATION

| | | | | | |
|--|---|--|---|-------|----------|
| Primary Contact: Name (Last, First) | <input type="checkbox"/> OK to pick-up <input type="checkbox"/> Legal Custody <input type="checkbox"/> Lives with <input type="checkbox"/> Receives Mailings | Secondary Contact: Name (Last, First) | <input type="checkbox"/> OK to pick-up <input type="checkbox"/> Legal Custody <input type="checkbox"/> Lives with <input type="checkbox"/> Receives Mailings | | |
| Home Address | | Home Address | | | |
| City | State | Zip Code | City | State | Zip Code |
| Mailing Address (if different from above) | | | Mailing Address (if different from above) | | |
| City | State | Zip Code | City | State | Zip Code |
| Home Phone (<input type="checkbox"/> Primary #) | Work Phone (<input type="checkbox"/> Primary #) | Home Phone (<input type="checkbox"/> Primary #) | Work Phone (<input type="checkbox"/> Primary #) | | |
| Cell Phone (<input type="checkbox"/> Primary #) | Relationship to Student | Cell Phone (<input type="checkbox"/> Primary #) | Relationship to Student | | |
| Email Address: | | Email Address: | | | |

IN CASE OF EMERGENCY NAMES OF PERSONS OTHER THAN PARENT WHO CAN ASSUME TEMPORARY RESPONSIBILITY

| | | | |
|--|--|------------|-------------------------|
| Emergency Contact 1 Name (Last, First) - Person that can Pick up Student | Emergency Contact 2 Name (Last, First) - Person that can Pick up Student | | |
| Home Phone | Work Phone | Home Phone | Work Phone |
| Cell Phone | Relationship to Student | Cell Phone | Relationship to Student |

*****STUDENT BACKGROUND*** IMPORTANT!!!**

HOME LANGUAGE SURVEY (as required by Arizona Department of Education)

| | | | |
|--|---|-----|--------|
| If parents separated/divorced, who has legal custody? _____ Does the non-custodial parent have restricted visitation rights? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, a copy of the legal papers must be provided) Does your child currently receive extra services? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Special Education/IEP <input type="checkbox"/> 504 <input type="checkbox"/> ELL or IEP Does your child have medical or dietary concerns we should know about? <input type="checkbox"/> Yes <input type="checkbox"/> No Has your child ever been expelled from another educational institution? <input type="checkbox"/> Yes <input type="checkbox"/> No Is your child currently in the process of being expelled from a school? <input type="checkbox"/> Yes <input type="checkbox"/> No Is your child currently under a long-term suspension? <input type="checkbox"/> Yes <input type="checkbox"/> No Has your child ever been a Leona Group student before? <input type="checkbox"/> Yes <input type="checkbox"/> No | What is the primary language used in the home regardless of the language spoken by the student? _____ What is the language most often spoken by the student? _____ What is the language the student first acquired? _____ | | |
| PLEASE LIST SIBLINGS | | | |
| | Names (Last, First) | Age | School |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |

| | | |
|---|---|-------|
| TO THE BEST OF MY KNOWLEDGE THE INFORMATION I HAVE PROVIDED ON THIS FORM IS ACCURATE AND TRUE. (FALSIFICATION OF INFORMATION IS A CLASS 6 FELONY - A.R.S. 13-2-107) STUDENT WILL BE WITHDRAWN FOR FALSE INFORMATION | X _____ | _____ |
| | PARENT / GUARDIAN / ADULT STUDENT SIGNATURE | DATE |

Will the student need to ride the school bus? Specific locations TBA Yes No

What school is student planning on attending during the 2018-2019 school year? _____

| | | | | | | |
|-------------------------------|--------------------------------------|--------------------------------------|---|--|-------------|------------|
| <input type="checkbox"/> Cash | <input type="checkbox"/> Money Order | <input type="checkbox"/> Credit Card | <input type="checkbox"/> Teacher Lead Class | <input type="checkbox"/> CBE Class(es) | Staff _____ | Date _____ |
| | | | \$50 | \$50 | Staff _____ | Date _____ |