

ADDITIONAL INFORMATION...

- Please call the Summer School Office at 401-315-2805, if you need assistance.
- For credit offerings, a copy of the final student report card or a copy of the notification of failure letter must accompany the registration.
- Tuition will not be refunded after the first day of classes.
- Grades will not be issued if a student has an unexcused absence during Summer School.
- Credit may not be earned for a summer school course unless that course was taken during the regular school year.
- A graduation ceremony will take place on *Tuesday, August 9th, at 4:00 pm*, in the Superintendent's office. Twelfth grade students wishing to participate may do so pending successful completion of all graduation requirements.
- Students who plan to drive to Summer School must complete a "Request for Driving Privilege" form. A copy of an insurance certificate, valid registration, and valid driver's license must accompany the form.

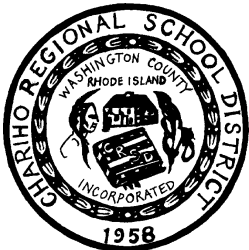
Car Registration # _____

Driver's License # _____

Insurance Information:

Company Name _____

Account # _____



CHARIHO SUMMER SCHOOL
455A SWITCH ROAD
WOOD RIVER JUNCTION, RI 02894

Chariho Regional School District

**Summer School 2011
Grades 5-12**



Barry Ricci
Superintendent

Carol Blanchette
Assistant Superintendent

Vincent Levcowich
Summer School Director

Robert Mitchell
High School Principal

Gregory Zenion
Middle School Principal

Chariho Summer School Mission

The Chariho Summer School will provide expert instruction so that all students have the time needed to master challenging curriculum. This learning experience will offer the opportunity to fulfill promotion, graduation, or higher education requirements and to grow through participation in interesting and standards-based educational offerings.

455A Switch Road
Wood River Junction, RI 02894-1313

Telephone: 401-315-2805
Fax: 401-415-6076
Voice/TDD: 401-364-1171

LOCATION:
CHARIHO REGIONAL MIDDLE SCHOOL

SESSIONS:
Full Credit July 5 - August 5
Half Credit July 5 - July 20
July 21 - August 5
Quarter Credit July 5 - July 12
July 13 - July 20

Classes begin: Tuesday, July 5, 2011

FEES:
1 Credit Course \$150.00
.50 Credit Course \$ 75.00
.25 Credit Course \$ 37.50
Non-refundable Registration Fee for
Out-of-District Students \$ 30.00

REGISTRATION:
Payment is by **check or money order** at the
Middle School office on:

JUN 29 - 8:00 - 10:00 AM and 4:00 - 7:00 PM
JUN 30 - 9:00 - 11:00 AM

Mail-in registrations must be received by June
30, 2011. Make check or money order payable to
CHARIHO SUMMER SCHOOL and mail with
completed application to:

CHARIHO SUMMER SCHOOL
455A Switch Road
Wood River Junction, RI 02894

FOR OFFICE USE ONLY
CHECK #: _____
DATE RECEIVED: _____

DIRECTIONS: For each course selected,
indicate “F” for fall semester credit, “S” for spring
semester credit, or “Y” for full-year credit. Fall
semester classes begin on July 5th; spring
semester classes begin on July 21st.

**COURSE OFFERINGS AND
TIMES**

8:00 AM – 10:00 AM

____ Algebra II
____ Biology
____ English ____ 9 ____ 10
____ Graduation Portfolio*
____ Math ____ 5 ____ 6
____ Math ____ 7 ____ 8
____ Spanish ____ I ____ II
____ World Civ

* open to Chariho students only

A Daily Intersession Tutorial will be available
from
10:00 AM to 10:15 AM
for all students.

10:15 AM – 12:15 PM

____ Algebra I
____ EPS
____ English ____ 5 ____ 6
____ English ____ 7 ____ 8
____ English ____ 11 ____ 12
____ Geometry (Plane & Spatial)
____ Health ____ 9 ____ 10 ____ 11 ____ 12
____ US History ____ I ____ II

*Every attempt will be made to offer the
above classes. Courses will run pending
sufficient enrollment.*

CHARIHO SUMMER SCHOOL 2011
APPLICATION

Name: _____

Telephone: _____

Mailing Address: _____

Town: _____

State: _____ Zip: _____

Grade in 2010/2011: _____

School attended during the past year:

School Address (if other than Chariho):

THIS SECTION MUST BE SIGNED!

YOUR APPLICATION WILL NOT BE
ACCEPTED WITHOUT A STUDENT AND
PARENT/GUARDIAN SIGNATURE.

By signing below, we acknowledge that we have
read, understand, and fully agree to the Chariho
Summer School “Guidelines for Success.”

NOTE: If the “Guidelines for Success” are not
attached to this brochure, please call 315-2805
to request a copy.

Student Signature

Parent/Guardian Signature

Please indicate any educational and/or medical
needs of the student. _____

