

# Vail School District

## 2016 Summer School Credit Recovery Enrollment Form

Student's Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Email address (Online Health)  
\_\_\_\_\_

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**Semester 1** (May 31 - June 3, June 6-9, June 13-14) **Semester 2** (June 16-17, 20 – 23, June 27 – 30)

Course A: \_\_\_\_\_ Course B: \_\_\_\_\_

**\*\*\* Students who are completing a core credit during summer school must take the corresponding AZ Merit exam for their course during the last day(s) of the class in order to receive credit.**

**\*\*\*Please contact your school counselor if you are not 100% sure which course to sign up for.\*\*\***

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PARENT/GUARDIAN INFORMATION: (Please circle the preferred contact number.)

\_\_\_\_\_  
Father Work# Cell#

\_\_\_\_\_  
Mother Work# Cell#

\_\_\_\_\_  
Legal Guardian/Step Parent Work# Cell#

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EMERGENCY CONTACT: (Used only if none of the above can be reached.)

\_\_\_\_\_  
Name Relationship Contact#

\_\_\_\_\_  
Parent Signature

High School that you attend and receives transcripts: \_\_\_\_\_

IEP: YES NO If YES, Case Manager's name \_\_\_\_\_

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**\*\*\*This form must be delivered to your high school bookstore or Brandy Dujmic at the Vail School District central office by May 16<sup>h</sup> (1<sup>st</sup> session) or May 20<sup>th</sup> (2<sup>nd</sup> session) in order to avoid late fees. Remember that in-person classes are capped at 25 students and are filled on a first come-first served basis, so please turn in as soon as possible. \*\*\***

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**\*\*FOR OFFICE USE ONLY\*\***

Semester 1 Semester 2 Both

Fee Paid: \$ \_\_\_\_\_ Date Received: \_\_\_\_\_ Scholarship Approved By: \_\_\_\_\_

Bookstore Signature: \_\_\_\_\_