



**CHS 2020 Summer School
Registration Form
Chickasaw High School 8:30AM-12:30PM**

**Term 1: June 4 – June 25; Term 2: July 6-23
Monday – Thursday (online & face-to-face)**

STUDENT INFORMATION		
Student's Last Name:	First:	Email Address:
Street Address:	City:	Zip Code:
Home Phone Number:	Parent's Name:	Parent's Cell Number:
Emergency Number:	Emergency Contact:	Grade Just Completed:

**Students are only allowed to take one course at a time for a total of two courses.
Please indicate which course(s) you need to take:**

Course	Semester 1 or 2 CR	Entire Course	Course	Semester 1 or 2 CR	Entire Course
Algebra 1			English 9		
Geometry			English 10		
Algebra w/Finance			English 11		
Algebra II w/Trig			English 12		
Algebraic Conn.			World History 9		
Precalculus	N/A		US History 10		
Physical Science			US History 11		
Biology			Government 12		
Chemistry			Economics 12		
Anatomy & Phy.			Driver's Ed (1/2)	N/A	
Earth & Space			Health (1/2)	N/A	
Spanish I	N/A		Spanish II	N/A	
Business Tech.	N/A		Career Prep (A/B)		

Summer School Fees

\$50 for each course; \$20/late fee

Payment Information

All students must pay for summer school with cash, cashier's check, or money order.

PERSONAL CHECKS, CREDIT CARDS, OR DEBIT CARDS ARE **NOT** ACCEPTED!

**Students dismissed from summer school for disciplinary reasons and/or attendance
are not entitled to a refund of any portion of their tuition.**

Summer School Registration Dates – 2020

Chickasaw High School	Date/Time	Date/Time
50 Chieftain Way, Chickasaw	June 2 – 9AM-12PM	June 3 – 9AM-12PM

SUMMER SCHOOL CREDIT RECOVERY REQUEST FORM

I, _____ (Student Name), request consideration for Summer School Credit Recovery or Entire Course Recovery (AHSAA does not accept Credit Recovery) in _____ (Name of Course[s] Failed).

I understand that daily attendance is required to complete all coursework. I have read the requirements for admission to the Summer School Credit Recovery Program and understand my responsibilities if admitted. I am aware that a maximum grade of 70 is available through **Credit Recovery** and that should I desire a higher option, I will be required to take the **Entire Course**. My signature and that of my parent/guardian signifies our understanding of this grading procedure and all other requirements associated with the Summer School Credit Recovery Program.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Teacher of Course Failed Signature _____ Date _____

Attached Documentation _____

Counselor Signature _____ Date _____

Principal Signature _____ Date _____

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May 2020