



# Saturday School Courses

## 2023-2024 REGISTRATION FORM

### STUDENT INFORMATION

STUDENT NAME \_\_\_\_\_ GENDER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GRADE \_\_\_\_\_

HOME SCHOOL \_\_\_\_\_ MCPS STUDENT ID NUMBER (REQUIRED) \_\_\_\_\_

HOMEROOM TEACHER/COUNSELOR NAME \_\_\_\_\_ ENROLLMENT DATE \_\_\_\_\_

#### CENTER LOCATIONS – HIGH SCHOOLS (CHECK ONE)

- CLARKSBURG     EINSTEIN     GAITHERSBURG     MONTGOMERY BLAIR     VIRTUAL  
 NORTHWEST     PAINT BRANCH     SPRINGBROOK     WHEATON

#### STUDENT RACE (CHECK ONE)

- AMERICAN INDIAN OR ALASKAN NATIVE     ASIAN     BLACK OR AFRICAN AMERICAN     HISPANIC/LATINO  
 NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER     WHITE     TWO OR MORE RACES

HAS THIS CHILD ATTENDED SATURDAY SCHOOL BEFORE?  YES  NO IF YES, FOR HOW MANY YEARS? \_\_\_\_\_

### PARENT INFORMATION

PARENT NAME \_\_\_\_\_ CELL PHONE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ WORK PHONE \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ EMERGENCY CONTACT NAME \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ EMERGENCY CONTACT PHONE NUMBER \_\_\_\_\_

**Please notify the Center Director if you would like our staff to know about your child's 504 accommodations or learning needs.**

### PARENTAL CONSENT *(withholding consent does not affect your child's participation in Saturday School)*

**I give permission / do not give permission** (circle one) to the George B. Thomas, Sr. Learning Academy (Saturday School) and Montgomery County Public Schools ("MCPS) to share information about my child as described below for program planning and to evaluate the effectiveness of Saturday School. Saturday School will share the following with MCPS:

- Student name; Student ID number; Student birthdate; Saturday School site; Saturday School attendance.

For program planning, MCPS will share the following information from your child's student record with Saturday School:

- Selection for honor roll, or a higher designation, and academic assessments (such as MAP-R and MAP-M scores).

For evaluation, MCPS will match student information from Saturday School with grades and assessment scores from the student records. MCPS will then remove all references to student name and student ID number to evaluate the impact of Saturday School on improving student's academic outcomes.

The results of MCPS' evaluation will be reported to Saturday School in summary fashion, with no individual students identified.

Saturday School and MCPS will not share your child's personal information with others and will take steps to safeguard the information at all times.

**I give permission / do not give permission** (circle one) for my child to be included in any photographs taken or videos made of Saturday School to be used in Saturday School marketing materials.

PARENT / GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

### REGISTRATION FEES (CHECK ONE)

- \$40 – STUDENTS RECEIVING FREE AND REDUCED PRICE MEAL SYSTEM (FARMS)     \$85 – non-FARMS.

Can you help pay the registration fee for a child who cannot afford it?  YES  NO AMOUNT \$ \_\_\_\_\_