

**OAKWOOD JUNIOR-SENIOR HIGH SCHOOL
SUMMER SCHOOL REGISTRATION FORM**

Name of Student _____ Telephone _____

Name of Parent _____

Address _____

School (if other than Oakwood) _____

Present Grade _____ Counselor's Name _____

Course #1 _____ Session: 1st _____ 2nd _____

Course #2 _____ Session: 1st _____ 2nd _____

Tuition _____ Class Fee _____

Amount submitted with this application _____ Date Received _____

Accepted by _____

By signing below, the student and parent acknowledge that they have read the Summer School Policy Statement and General Regulations, including the Summer School Attendance Policy as stated in Regulation #6.

Signature of Student _____

Signature of Parent _____