

**MEANINGFUL ENGAGEMENT REGISTRATION FORM**

**PLEASE RETURN THIS FORM TO ROOM W105B (KIMBERLY NOLAND)**

**STUDENT INFORMATION:**

Student Name: \_\_\_\_\_  
PRINT NAME

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Email: \_\_\_\_\_

Home Telephone Number (s): \_\_\_\_\_

**CHECK ALL THAT APPLY:**

\_\_\_\_\_ Need to recover absences

\_\_\_\_\_ Need tutoring in English/Writing

\_\_\_\_\_ Need tutoring in History

\_\_\_\_\_ Need tutoring in Science

\_\_\_\_\_ Need tutoring in Math

\_\_\_\_\_ Need ACT/SAT Preparation

**I give permission for my child/student to attend Meaningful Learning Sessions at George Washington High School for the 2025/2026 academic school year.**

**PLEASE CHECK ONE:**

\_\_\_\_\_ My child will need transportation to/from Meaningful Learning sessions. The address provided above is accurate.

\_\_\_\_\_ My child will walk to and from his/her home for Meaningful Learning sessions.

\_\_\_\_\_ Parent/Guardian will provide transportation to Meaningful Learning sessions.

Parent/Guardian

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_