



Bismarck Public School District

Simle Middle School Summer Program – 2026 Registration Form for Incoming 6th Grade Students attending Bismarck Public Schools

BISMARCK PUBLIC SCHOOLS

(One student per form – **deadline April 2, 2026**)

College, career, community ready

I am registering my child for the Simle Middle School Summer Program. Registration is for the 4-week session.

June 1 – June 24, 2026 8:00–12:00 p.m.

Weeks 1-3: Monday-Thursday, Week 4: Monday-Wednesday

Student name: _____ Date of Birth: _____
Grade entering in the Fall: _____ Male: _____ Female: _____
Parent/Guardian Name: _____ Daytime phone: _____
Address: _____
Emergency Contact Name: _____ Phone number: _____
School child currently attends: _____

So that our staff is prepared to meet the needs of your child, please respond to the following questions:

- 1. Does your child have:
a. an IEP? Yes ___ No ___
b. a 504 plan? Yes ___ No ___
c. a Behavior Plan? Yes ___ No ___
d. a Health Care Plan? Yes ___ No ___
(this doesn't mean health insurance)
2. Will it be necessary for Simle Middle School staff to administer medication to your child during summer school hours (8:00 – 12:00)? Yes ___ No ___
If "YES" please list name of medication(s) here: _____
3. Does your child currently have or need an Epi-pen or inhaler at school?
a. an Epi-pen? Yes ___ No ___
b. an Emergency Inhaler? Yes ___ No ___

** If yes, please assure this item is at the school for the Simle Middle School Summer Program.

You will receive a letter confirming your child's registration in May. If you have any questions about the Summer Program, please call Simle Middle School at 323-4600. Return this completed form to Simle Middle School.

Parent/Guardian Signature: _____ Date: _____

The Bismarck Public School District does not discriminate on the basis of race, sex, color, national origin, religion, age or disability in admission or access to, or treatment or employment in, its programs and activities. To obtain this material in an alternate format, contact Russ Riehl, Principal, at 701-323-4600 or a TTY Relay Service at 711 or 1-800-366-6888.

Table with 3 columns: FOR OFFICE USE ONLY, Initials of Recorder: _____, Date received: _____, Student ID: _____