

Hastings Middle School Summer Academy

◆ *for students currently in 5th, 6th, 7th, and 8th grades during the 2017-18 school year* ◆

GENERAL INFORMATION: The Hastings Middle School Summer Academy is available to students currently in 5th, 6th, 7th, and 8th grades during the 2017-2018 school year. The location of the Hastings Middle School Summer Academy will be at the Hastings Middle School facility.
Transportation is not provided for this program.

DATES: Monday-Friday: June 18 – July 13 (No School July 4th)

TIME: 8:30 am – 12:00 Noon

ACADEMIC RECOVERY CLASSES: All students in the Academic Recovery Program will receive a free summer school program, but they will still need to complete and return the Targeted Services Referral Intake form which is on the reverse side of the attached registration form. **The student's summer school schedule will be dependent on the number of classes the student has not passed.

STILL HAVE QUESTIONS? If so, please call: Joe Haas at 651-480-7067 or send an email to jhaas@hastings.k12.mn.us

Academic Recovery Classes

Language Arts Science

Social Studies Math

The academic course offerings are designed to provide additional opportunities for students who did not achieve academic success during the regular school year. These students were middle school students during the 2017-2018 school year. Some students are required to successfully complete the HMS Summer Academy before being promoted to the next grade. Some students need to take classes for academic recovery or skill remediation because of failing classes. Parents or teachers may also recommend that their child participate.

The courses are designed to fulfill state and national standards; a variety of instructional techniques will be used. Homework will be required and students cannot be absent for more than 3 days of school or they will fail the class. Letters will be mailed to students during the week of June 11th listing the room numbers and specific times to report to on the first day of class.

DATES: Mon.-Fri.: June 18 – July 13
(No school July 4th)

TIME: 8:30 am – 12:00 Noon

Hastings Middle School Summer Academy - Registration Form -

Mail or deliver completed registration forms to:
Hastings Middle School, ATTN: Summer School, 1000 11th St. W., Hastings, MN 55033

REGISTRATION DEADLINE is May 18, 2018
Requests to enroll in classes after that date will only be considered if space is available

(Please print or type)

Child's Name: _____ Grade (2017-2018 school year) _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Father's Name: _____ Mother's Name: _____

Father's Work #: _____ Mother's Work #: _____

Father's Cell #: _____ Mother's Cell #: _____

IN CASE OF EMERGENCY: (Name of person, other than parent, who could be contacted)

Name: _____ Phone #: _____

Doctor: _____ Phone Number: _____

Hospital: _____

Special Medical Concerns or Allergies: _____
(If more space is needed, please use additional sheet of paper and include with registration.)

Does your child receive special education or English as a second language services? YES NO

If yes, then indicate area of need: _____

Academic Recovery Program (open to students currently in grades 5, 6, 7 and 8)

*The above listed child has my permission to attend field trips that are part of their selected class curriculum.
The field trips will be chaperoned by teaching staff and transportation provided by school when needed.*

Parent/Guardian Signature

◆ Please fill out the Targeted Services Intake/Referral form on the reverse side of the registration form ◆

District 200 Targeted Services
REFERRAL / INTAKE / NEEDS / GOALS

Name: _____ DOB: _____

School: Hastings Middle School Grade for the 2018-2019 School Year: _____

Parent(s)/Guardian(s): _____

Address: _____

City: _____ State: _____ Zip: _____

ELIGIBILITY CRITERIA
(Check all that apply)
INDICATORS OF NEED

- | | |
|--|---|
| <input type="checkbox"/> Special Education Services (IEP) | <input type="checkbox"/> Scored at level I or II on the most recent MCA |
| <input type="checkbox"/> Section 504 Plan | <input type="checkbox"/> Is frequently absent or tardy from school |
| <input type="checkbox"/> School social worker support | <input type="checkbox"/> Has repeated one or more grades |
| <input type="checkbox"/> School psychologist support | <input type="checkbox"/> Has changed school/moved often |
| <input type="checkbox"/> Limited English Proficiency | <input type="checkbox"/> Behavior negatively impacts learning |
| <input type="checkbox"/> Mental Health Services | <input type="checkbox"/> Emotional issues negatively impact behavior |
| <input type="checkbox"/> Out of home placement | <input type="checkbox"/> Recent crisis/significant emotional Stress |
| <input type="checkbox"/> Struggling in Math | <input type="checkbox"/> Struggling in Reading |
| <input type="checkbox"/> Medical condition impacts performance | <input type="checkbox"/> Scored below proficient on NWEA MAP |
| <input type="checkbox"/> In need of social/emotional support | <input type="checkbox"/> Failed one or more classes |
| | <input type="checkbox"/> Other: _____ |

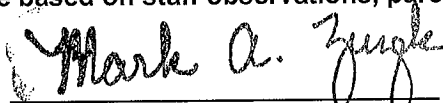
DESCRIPTION OF LEARNER'S STRENGTHS:

ONE GOAL FOR THE SCHOOL YEAR:

DESCRIPTION OF LEARNERS NEEDS (ACADEMIC, SOCIAL, STUDY SKILLS, ETC.):

The measurement of success will be based on staff observations, parent input, and student responses.

Parent's Signature



Middle School Principal Signature

Date