



LOS ANGELES UNIFIED SCHOOL DISTRICT
MEMORANDUM

**Summer School 2004
Student Application**

Name: COLLINS, JOHN District ID: 110687M998

Address: 552 N. GRAND AVE. Phone: (213) 555-5555
Los Angeles 90012 Emg. Phone: (213) 555-5556

Birthdate: 11/06/87 Grade Level: Grade as of July 1, 2004

Parent/Guardian: COLLINS, ROSE Date:

School of Attendance: 8664 GARDENA HI

School Requested: _____
(You may request to attend any school where the District offers a summer school program)

Are you currently participating in a program in which
transportation is provided? ____Yes

Program: _____
(to be entered by counselor)

Courses Requested in Order of Preference	Program Code(*)	Counselor Approval
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I understand that my son/daughter must be in attendance the first day of class and be in attendance the entire summer school. If not in attendance on the first day, his/her seat will be forfeited. I further understand that if the SB-813 program is oversubscribed, participants will be identified by a random selection process.

Signature of Student

Signature of Parent/Guardian

****Program Codes**

R = Remedial
G = Graduation Requirement
P = Proficiency

S = Enrichment (SB-813)
D = SDC
W = DRW-ELA Summer