

## **Application for Parkway Elementary Summer 2019 St. Lucie Public Schools 21<sup>st</sup> Century Community Learning Center Program**

This program is being offered to your child to help maintain his/her math, reading, writing, and science skills. The summer program will consist of academics, enrichment and extracurricular activities. Academics will be comprised of the basic core curriculum studies. Each student will participate in both academics and extracurricular activities.

Summer camp will begin June 12<sup>th</sup> and run through July 17<sup>th</sup>. The summer sessions will run Monday through Thursday 7:30 AM till 12:30 PM.

**We will offer the program at this summer school site:**

**Parkway Elementary  
7000 NW Selvitz Road  
Port Saint Lucie FL 34983  
772.340.4800**

Each student will be provided with breakfast upon arrival and lunch prior to dismissal. Meals will be served at no cost to the parent/student(s). Seats in our program are limited and are offered on a first come first serve basis. If our numbers are more than we are able to accommodate, your child will be placed on a waiting list.

**Please note the rules that are listed below:**

- **Transportation is not provided for students participating in the Summer Program.** If your child walks home, please send in a note stating this.
- If your child signs up, attendance is mandatory for all four weeks. A note from the parent must be brought in when absent.
- No student will be allowed to leave campus without written notification (from the parent) to the site coordinator. Parents will need to sign students out in the office if picking up early.
- Students are bound to the St Lucie Public Schools Code of Student Conduct during their participation in the 21<sup>st</sup> CCLC. <http://stlucie.k12.fl.us/pdf/codeofconduct.pdf>
- Disruptive behavior will result in termination from the program – **no exceptions.** Students must respect their peers, faculty and staff.
- **Students must be picked up by 12:30 p.m. each afternoon. After 3 late pickups, they will be terminated from the program.**

**Please fill out the back side of this form completely and return with your child to the school's front office.**

**Application for Parkway Elementary Summer 2019  
St. Lucie Public Schools 21<sup>st</sup> Century Community Learning Center Program**

**Make sure this application is filled out completely before turning it in. If not, it will not be processed.**

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School Enrolled In: \_\_\_\_\_ Grade: \_\_\_\_\_ Student ID# \_\_\_\_\_

Siblings Attending This School: \_\_\_\_\_

Student Lives With: Mom \_\_\_\_\_ Dad \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_

Student Receives: Free Lunch \_\_\_\_\_ Reduced Price Lunch \_\_\_\_\_ Full Price Lunch \_\_\_\_\_

Student Receives Services In: Exceptional Student Education (ESE) \_\_\_\_\_ English as Second Language (ESOL) \_\_\_\_\_

**Student Will Be Parent Pick-up \_\_\_\_\_ Student Walks Home \_\_\_\_\_**

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

Parent Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Special Comments Regarding Medications or Health Issues: \_\_\_\_\_

Persons Authorized to Pick Student Up: \_\_\_\_\_

**St. Lucie Public Schools / 21<sup>st</sup> Century Community Learning Center  
RELEASE OF INFORMATION**

I agree that the following information may be released for my child (Failure to check "NO" may result in the release of information):

- Yes**  **No** - My child's name, photo, voice & video to the press for recognition or news purposes.
- Yes**  **No** - My child's name, photo, voice & video for publicly assessable school or district websites or broadcast.
- Yes**  **No** - My child's name, photo, voice & video for publicly assessable Florida Department of Education or 21<sup>st</sup> CCLC websites or broadcast.
- Yes**  **No** - My child's name, photo, and contact information to the yearbook photographers'.
- Yes**  **No** - My child's directory information (student's name and grade)

Name (Please Print) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**If you wish to receive communication by email, provide email address:**

