



CORNERSTONE CHRISTIAN SCHOOLS

Home of the Eagles

MIDDLE SCHOOL SUMMER WORKSHOPS - 2017

CCS Summer school is offering workshops in both Language Arts and in Math for our middle school students who have just completed either 6th or 7th grade. Each MS workshop will be one hour long, four days a week. During the workshop, your child will be able to work on and practice skills that were introduced during the regular school year in a small classroom setting. The workshops will be offered June 19 - 30 & July 17 - August 11. You may sign your child up to attend for a week at a time or for the full 6 week session. You may also sign your child up to attend the Language Arts workshop or the Math workshop or both. The school administration has worked it out so that these workshops are affordable to our school families, and I encourage you to consider our school as an option to keep your child fresh and academically equipped to start the next school year.

8:30 - 9:30	Literature & Writing (daily, M-Th)
9:30 - 10:30	Mathematic Review (daily, M-Th)
10:30 - 11:30	Sports/Field Games (optional)

- Individual weeks: Math or Language Arts workshop \$40.00 (\$80/both)
- Math workshop, four days a week for one hour per day: 6 weeks = \$240.00
- Language Arts workshop, two days a week for one hour per day: 6 weeks \$240.00
- 6 week session, registered and paid in advance, \$200.00 per workshop (Math or Language Arts)

If you have any questions, please call the school office at (805) 987-8621.



**MEDICAL INFORMATION
Summer 2017**

Student Name: _____ Grade in Fall: _____

My student will be attending the following session, weeks or days of the CCS Summer Program:

- | | |
|--------------------|--|
| _____ Full Session | June 19 – June 30; July 10 – August 11 |
| _____ Week 1 | June 19 to 23 |
| _____ Week 2 | June 26 to 30 |
| _____ Week 3 | July 10 to 14 (*no MS workshops this week*) |
| _____ Week 4 | July 17 to 21 |
| _____ Week 5 | July 24 to 28 |
| _____ Week 6 | July 31 to August 4 |
| _____ Week 7 | August 7 to 11 |
| _____ Daily | Full day summer program only
(please list which days you will be attending) |

****Please be sure to apply sun block to your child prior to arrival at school on days there are outdoor activities. Send sun block for the child to apply throughout the day.****

Medical Information:

Does the student have any known mental, emotional or physical condition that may affect his/her activities or progress at school? _____ No _____ Yes

If yes, explain _____

Does the student have allergies or currently take any prescribed or over-the counter medication? _____ No _____ Yes

If yes, explain _____

A Medication Authorization must be on file in the Health Room to authorize school personnel to administer medications. All medications on campus (over-the-counter and prescription) must remain in the school office and be administered by school personnel. **No exceptions.**

Parent/Guardian Signature _____ Date _____