



HAYDEN CATHOLIC HIGH SCHOOL

Summer School Credit Recovery Enrollment Form

Google Classroom will be used for instruction with tests given in room 105. **The majority of the work must be done on the student's own time online.** Homework assigned on Google Classroom will be graded around noon and 4 pm every week day. Students should receive results via email shortly after. Tests must be taken on Mondays, Wednesdays, or Thursday between 8am and 11 am.

- Instructor: Google Classroom set up by Certified Teachers
- COST: \$200 per Semester Class**
- If a student fails to complete the course during the deadline, **no refund and no credit** for the class will be given.
- Enrollment deadline is June 3.**
- Students will be required to bring their Chromebooks to summer school sessions in order take tests.
- Students will meet in room 105 on Mondays, Wednesdays, and Thursdays from 8am to 11am.
- Students will have a total of 6 class days to complete each course. Any day needed after that will be an extra \$20.
- Parents will be notified of students progress once a week, but may contact either Miss Herman or Miss Voegeli at any time for questions.
- If you have any questions, please contact Angela Herman (hermana@haydencatholic.net) or Christine Voegeli (voegelic@haydencatholic.net) or call James Sandstrom at 785-272-5210 ext 106.
- Summer School: June 3-June 27.**

Cut on dotted line and keep the top portion of this paper for your records.

Return this form with Payment to:

Hayden Catholic High School
 Attn: Summer School Recovery/ Christine Voegeli
 401 SW Gage Blvd
 Topeka, KS 66606

Please mark all boxes for the class(es) that your student is taking.

Class	1 st Semester	2 nd Semester
Freshman Theology		
Sophomore Theology		
Sophomore English		
Earth/Space Science		
Biology		
Algebra I		
Geometry		
Algebra II		
World History		
American History		
Government		

Student's Name:	Parent's Name:
Parent's Cell Phone	Parent's Email

Payment Information:

<input type="checkbox"/> Check (Please make payable to Hayden Catholic High School)	Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard
Credit Card Number	Exp. Date CVS Code

For office use only:

Paid: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Online	Date Paid:	Payment collected by:
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